

Impact of the COVID-19 pandemic on patients and palliative care workers

Iwona Twardak, Aleksandra Lisowska, Iwona Klisowska, Jerzy Twardak

Division of Family and Pediatric Nursing, Department of Nursing and Obstetrics, Faculty of Health Sciences, Wrocław Medical University

Introduction: The COVID-19 pandemic emerged suddenly, surprising healthcare systems around the world and revealing its lack of readiness to operate in such difficult conditions. It caused huge losses in the economy and education, disturbing the functioning of the entire country. It has contributed to the deaths of over 2 million people, changing the structure of many families. It also set new challenges for palliative care and its staff, creating a new group of patients with severe pneumonia and respiratory failure. Despite many new challenges, the overarching goal of palliative care has remained to relieve physical symptoms, emotional stress, and provide support to patients and their families.

Objective of the work: The aim of the study was to present the situation of people covered by palliative care during the COVID-19 pandemic, as well as the problems and new challenges faced by medical workers based on the latest scientific reports.

Conclusions: A large number of people dying from COVID-19 respiratory failure resulted in an increased demand for palliative care services. Maintaining social distance as a form of limiting the spread of the pandemic forced the introduction of new forms of contact with the patient (telepaths), but also condemned many patients to loneliness and depression.

In just 100 days, the COVID-19 pandemic has changed the picture of the global health situation, posing new challenges and responsibilities to medical services. It also significantly influenced the functioning of palliative care, creating a group of new patients with extreme respiratory failure on the one hand, and strongly limiting contact between the patient, family and medical staff on the other. Initially, the WHO guidelines on how to maintain basic health services did not take into account the situation of people receiving palliative care. A chapter on palliative care was later added, recommending a COVID-19 care plan that respects the preferences of patients and their families.

Palliative care patients are a group of people who are particularly sensitive to any changes in the functioning of health care. Direct contact with members of the palliative care team was essential for them, but it could be deadly. Reducing or completely abandoning home visits was most felt by the charges of home hospices.

HOME HOSPICES:

- The use of ICT systems to contact the patient. Patients cannot use them on their own. Family help needed.
- Insufficient personal protective equipment. Limiting the number of visits, the possibility of transferring the infection.
- Personal protective equipment aroused fear among seriously ill patients, limited the possibility of comprehensible communication and intensified the feeling of isolation and loneliness.
- Inability to use the help of a physiotherapist, psychologist, volunteer, which in turn resulted in a deterioration of the quality of life.

STATIONARY HOSPICES

Inpatient palliative care in the era of the COVID-19 pandemic faced two dominant problems.

- Fear of isolation delaying the decision to admit to residential care and exacerbating pain and affecting the general deterioration of health. Fear of dying alone without contact with loved ones.
- Lack of qualified medical personnel who were sent to work with infected patients or were ill themselves.

NEW CHALLENGES FOR PALLIATIVE CARE

- A new large group of patients with respiratory failure and other chronic post-infection complications.
- Increasing the number of qualified palliative care workers.
- Training for medical staff in other fields in the field of accompanying a dying person and their family.
- Modifying and improving forms of ICT communication so that they are accessible to the elderly, the sick and the infirm.

Bibliography

1. The Lancet. Palliative care and the COVID-19 pandemic: Lancet 2020;395:1168. 2. Oluyase A., Hocaoglu M., Cripps R., et al. The Challenges of Caring for People Dying From COVID-19: A Multinational, Observational Study (CovPall): Journal of Pain and Symptom Management. 2021 3. Radbruch L., Knäuper F.M., de Lima L., de Joncheere C., Bhadelia A. The key role of palliative care in response to the COVID-19 tsunami of suffering: Lancet. 2020 9;395(10235):1467-1469. LANCET 4. Janssen D., Ekström M., Currow D.C., Johnson M.J., Maddocks M., Simonds A.K., Tonia T., Marsaa K. COVID-19: guidance on palliative care from a European Respiratory Society international task force: Eur Respir J. 2020; 56(3): 2002583. 5. FLORENCIO, Raquel Sampaio et al . Palliative care amidst the COVID-19 pandemic: challenges and contributions: Acta paul. enferm. 2020; 33: eAPE20200188