



Original Article

## Palliative Care Support for Cancer Patients: Short Commentary Article

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### ABSTRACT

**Objectives:** Palliative care is the path to advance the well-being of the patients and their families facing challenges related to dangerous disease and deadly sickness through safeguard and ease of discomfort by employing advanced recognition, evaluation and therapy and other issues such as physical, psychosocial and spiritual.

**Materials and Methods:** Descriptive design was used for this research because it focuses on the what and why the phenomenon for example, what is palliative care and why is it important. Quantifying the participants and observing them through home visits.

**Results:** In the interview of the patients, we found responses that palliative care is quite helpful for the cancer patients to manage and minimise and ease their symptoms and assists to relieve pain and other problems, physical, psychosocial and spiritual.

**Conclusion:** During the internship period in the Can Support organisation came across many cancer patients and some other mental problems such as dementia, the patients were included at any age. Can Support is the largest home-based palliative care in North India. This home-based palliative care helps cancer patients, especially those living below the poverty line and their families to minimise symptoms and ease their sufferings and give some instructions for their lifestyle and eating habits. They try to reduce the symptoms and give support mental, physical and psychological support to the patients and their families.

**Keywords:** Palliative care, Cancer, Psychosocial, CAN support, Patients

### INTRODUCTION

The World Health Organization (WHO) defines palliative care as a method that enhances the standard of living of the patients and the families fronting issues aligned with serious diseases through elimination and relief of suffering by means of early identification, accurate evaluation and treatment of pain and if there is further trouble such as physical, psychosocial and spiritual.<sup>[1]</sup>

Can Support is North India's largest home-based palliative care service provider and a WHO awarded the organisation. Can Support is providing free palliative and supportive care services to cancer patients since 1996. Can Support believe that pain relief and palliative care are an integral part of healthcare? Cancer survivor Ms. Harmala Gupta founded Can Support in 1996. It is now India's largest palliative care programme.<sup>[2]</sup> The organisation's goal is to make it available all over India.

**Table 1:** The patients responses on the field.

Questions	Patient Age	Diseases	Response	Outcome
Patient 1 How is your health	Demographic information Operation on the breast 35/f	Cancer of the breast	Good and with pain, need	Felt better
Patient 2 How are you doing? How's your stress level recently?	D 31/operation on the right leg Date: 2013	Bone cancer	Tension and worries due to his operation failed	Unsatisfied and tension
Patient 3 What can we help you?	68/f	Abdominal cancer	Constipation	Felt better after giving enema
Patient 4 How are you feeling?	60/m	Gallbladder cancer	Slight pain	Slight pain
Patient 5 How are you doing?	50/m	Mouth cancer	Better	improved
Patient 6 how are you feeling?	35/f	Mouth cancer cannot talk	Feeling pain	Problem swallowing
Patient 7 Is there anything you want to say?	75/f	Dementia	Cannot recognise known people	Temporary memory loss
Patient 8 4. Have you been eating and sleeping?	65/m	Prostate cancer	Have moderate Bone pain and trouble urinating	Decreased force in the stream of urine

## MATERIALS AND METHODS

Descriptive design was used for this research because it focuses on the what and why the phenomenon for example, what is palliative care and why is it important. Quantifying the participants and observing them through home visits.<sup>[3]</sup> The study duration was from 4 October to 29 October 2021 at can support address Noida office address. H. No-1678, Arun vihar, first floor, sector-37, near golf course metro station organisation. Can Support operates 13 centres around the Delhi area (South, West, East, Northwest, Northeast, Bawana, Gurgaon, Faridabad, Ghaziabad, Noida, Old Delhi and Tughlakabad). The current staff includes 24 multidisciplinary teams, each consisting of a physician, nurse and counsellor responsible for giving home-based palliative care and also nurse facilities for changing and dressing patient wounds and external injuries. Noida team was one of the centres of the organisation in which the study was carried out.

The number of participants was 20 through the team of experts from the research organisation headed by Ms. Anamika. She trained the team for the study. Patients directly report to the service support centre. Where the consent forms were designed and managed by the head of the team. We visited the homes of the patients one after the other and the mode of assessment was an in-depth interview. Through open-ended questionnaire format, where the participants can express themselves in won words without forgetting and altering any information from the patient's point of view.<sup>[4]</sup>

The cancer patients, especially those living below the poverty line (BPL), were visited. All teams are having one doctor, one

nurse and one counsellor. On the 4 October 2021, we went to the home of patients for visiting every day for 1 month. Consent of the patients was sought and investigation about the condition of the patients and their cancer history was carried out.

## RESULTS

On an interview with the patients.

## DISCUSSION

The doctor of the team prescribed painkiller drugs due to severe pain, according to the history report with the condition of the patients and the first patient's pain reduced. In support of the above response, it is evident that management of cancer pain has not been working as it should according to Damani *et al.*<sup>[5]</sup> Regardless, the second patient had worries and tension due to the that his operation failed [Table 1].

Painkiller drugs are given them by the doctor according to the stage of the pain of the patient's Tab- tramadol, an. If they had severe pain she prescribed Tab. Morphine. If patients had an open wound, the nurses dressed it. Then, the counsellor also gave some instructions for changing their lifestyle. The third patient had constipation after a nurse give her medicine (enema) she felt better. The organisation gives support to the patients and their families and helps to relieve their symptoms by giving pain killer and if the patient had an open wound a nurse dress and clean the wound but they are not involving operations and other kinds of treatment.<sup>[6]</sup>

## CONCLUSION

During the internship period in the Can Support organisation met many cancer patients and some other mental problems such as dementia, the patients were included at any age.

Can Support is the largest home-based palliative care in North India. This home-based palliative care helps cancer patients especially those living BPL and their families to minimise symptoms and ease their sufferings and give some instructions for their lifestyle and eating habits. They try to reduce the symptoms and give mental, physical and psychological support to the patients and their families. Labelling suffering entails maintaining issues that exceed physical symptoms. Palliative care employs a group of procedures to assist patients and their safe keepers. Here contain conveys practical necessities and offer mourning aiding. It provides a reinforcing framework to guide patient stay as enthusiastically as practicable until disappearance.

Palliative care is mainly meant to advance the well-being of the patients and their families facing challenges related to dangerous disease and deadly sickness through safeguard and ease of discomfort by employing advanced recognition, evaluation and therapy and other issues such as physical, psychosocial and spiritual.

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## Declaration of patient consent

Patient's consent not required as patient's identity is not disclosed or compromised.

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## Conflicts of interest

There are no conflicts of interest.

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