

# MASTERCLASS

Royal College of Physicians of Ireland No. 6 Kildare St, Dublin 2

4.00 pm Wednesday, February 3, 2010

RCPI Masterclass Series 2009/2010 Treating the Acutely Ill Patient – Update and advances in management of common medical conditions presenting on call

Part III: Palliative Medicine Session



# Welcome

Dr John Donohoe President, RCPI

Dr Diarmuid O'Shea Masterclass Series Convenor, RCPI



Dear Delegates,

In line with its mission to promote excellence in medical education and to support the advancement of the medical profession, we are pleased to welcome you to today's meeting – the Palliative Medicine session of the RCPI Masterclass Series on Treating the Acutely Ill Patient.

The RCPI Masterclass Series – which will run over seven sessions from October 2009 through to June 2010 – is aimed at keeping doctors up to date in evolving medical practice outside their specialty area and to facilitate their continuing medical education.

The objective of the series is to help those who are at the front line of our health service continuously improve their skills base, effectively facilitating excellence in patient care. The series brings together medical experts from a variety of specialties under a central theme, provides a senior forum for peer discussion and has in the past attracted unprecedented numbers for Irish training. The entire series will be webcast live to 23 regional hospitals and will also be available as a recorded webcast via the RCPI's Online Education and Resource Centre.

We would like to thank the chairs of this session, Dr Regina McQuillan and Dr Dominic O'Brannagain, and the speakers for their contribution to the programme and the series.

Each session qualifies for 3 CME credits from RCPI (21 in total for the series).

If you have suggestions for future topics in the series include them on the assessment form in your meeting pack. Alternatively, email your suggestions to us at helenmurray@rcpi.ie.

We hope you enjoy the meeting.

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Dr John Donohoe President Royal College of Physicians of Ireland

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Dr Diarmuid O'Shea Vice President for Education and Professional Development Royal College of Physicians of Ireland

# Programme: Wednesday, February 3, 2010

TIME	TITLE	SPEAKER	CHAIR
15.30 - 16.00	Registration		
16.00 - 16.25	Care of the imminently dying	<b>Dr Tony O'Brien</b> Marymount Hospice and Cork University Hospital	
16.25 - 16.30	Question and Answer Session		
16.30 - 16.55	New opioids formulations in cancer pain management	<b>Dr Jane Fleming</b> Waterford Regional Hospital	<b>Dr Regina McQuillan</b> Beaumont Hospital and St Francis Hospice,
16.55 - 17.00	Question and Answer Session		Dublin
17.00 - 17.25	What to tell patients and their family	<b>Dr Ita Harnett</b> Galway Hospice and Mayo General Hospital	
17.25 - 17.30	Question and Answer Session		
17.30 - 17.45	Refreshments		
17.45 - 18.10	The surprise question – care of people in the last year of life	<b>Dr Stephen Higgins</b> Our Lady's Hospice and AMNCH, Dublin	
18.10 - 18.15	Question and Answer Session		
18.15 – 18.40	Ethics and end of life care	<b>Dr Regina McQuillan</b> Beaumont Hospital and St Francis Hospice, Dublin	Dr Regina McQuillan Beaumont Hospital and St Francis Hospice, Dublin
18.40 - 18.45	Question and Answer Session		
18.45 - 19.15	Panel Discussion		

This meeting is approved for 3 CME credits by the Royal College of Physicians of Ireland

# Chairperson

Dr Regina McQuillan Beaumont Hospital and St Francis Hospice, Dublin



Regina McQuillan, FRCPI, is Palliative Medicine Consultant at Beaumont Hospital and St Francis Hospice where she is Medical Director. She has strong interest in Ethics and is Chair of the Clinical Ethics Forum at Beaumont Hospital and is a member of a number of Research Ethics Committees. She is also a member of the Ethics Working Group that took part in the revision of the Medical Council of Ireland guidelines.

## 16.00 - 16.25

## Care of the imminently dying

Dr Tony O'Brien Marymount Hospice and Cork University Hospital



## **Biographical Sketch**

Tony O'Brien is Consultant Physician in Palliative Medicine at Marymount Hospice and Cork University Hospital. Having completed his general medical training in Cork, he undertook higher specialist training at St Christopher's hospice in London. Dr O'Brien held the post of Consultant Physician at St Christopher's prior to talking up his current appointment in 1991. He served as chairperson of the national advisory committee on palliative care and subsequently served as chairperson of the inaugural national council for specialist palliative care. He chaired the Council of Europe Expert Committee on Palliative Care and is a former board member of the European Association for Palliative Care. He served as National Specialty Director for two terms and is a former chairperson of the Irish Association for Palliative care. Dr O'Brien has published and lectured on various aspects of palliative care.

## **Overview of Presentation**

The diagnosis of dying is a challenging but highly important diagnosis to make. Diagnosis is made on a detailed assessment of a range of clinical features. Once the diagnosis is made, the focus of care shifts to ensuring that patients experience the best possible level of pain and symptom control in a calm, peaceful and dignified environment.

The programme of care is inclusive of family members, including children. Families need a great deal of time and reassurance as they cope with the imminent loss of a loved one. Careful explanation of the various changes that are occurring is necessary and many families will welcome sensitive discussion regarding the dying process and its medical management.

This paper will provide detailed information on the medical management of the dying patient and appropriate guidance on family care. This is a critically important time in terms of positively influencing the bereavement process.

## 16.30 - 16.55

New opioids formulations in cancer pain management

Dr Jane Fleming Waterford Regional Hospital



### **Biographical Sketch**

Jane Fleming is a graduate of University College Dublin. She worked as Consultant Physician in Palliative Medicine at The Maelor Hospital, Wrexham, North Wales for five years before returning to practice in Ireland. She has worked for the past ten years as Consultant Physician in Palliative Medicine based at Waterford Regional Hospital. She has introduced and established Hospital Palliative Care teams in each of the four acute hospitals of the Southeast region – Waterford Regional, Wexford General, St Luke's Kilkenny and South Tipperary Hospital Group. She was the first Irish doctor to gain an MSc in Palliative Medicine (Bristol University). She is currently involved with research around new treatments and Quality-of-Life issues for patients with advanced brain tumours.

## **Overview of Presentation**

The aim of this presentation is to highlight some new formulations of opioids which have recently become available as part of the armamentarium of medications for the management of cancer pain. A secondary aim is to remind the audience of the principles of pain management.

The 'scene' is set with a number of MCQ questions. This is followed by the description of a case scenario which will form the basis for the remainder of the presentation.

The principles of pain management in a cancer setting are outlined. There is a brief description of the basic pathophysiological

mechanisms of pain, an understanding of which greatly helps in achieving a successful outcome of pain relief.

In relation to medications, the main focus will be on how and when to use 'strong' opioids in the management of cancer pain.

The audience's attention is also directed to the more complicated clinical situations of pain management in the setting of renal impairment, the elderly, opioid adverse effects/ opioid toxicity.

Finally, there is mention of referral to Palliative Care teams.

### 17.00 - 17.25

## What to tell patients and their family

Dr Ita Harnett Galway Hospice and Mayo General Hospital



### **Biographical Sketch**

Ita Harnett is Consultant Physician in Palliative Medicine at Galway Hospice and Mayo General Hospital.

### **Overview of Presentation**

How we communicate with seriously ill patients affects their sense of wellbeing. It can leave them feeling uncertain and alone or enhance their sense of guidance and support.

A case history is used to identify some of the challenges involved in such communication. It highlights the importance to patients of clear delivery of appropriate information and of feeling heard and cared about by their doctor/health care professionals.

The presentation touches on some of these challenges: how we judge the amount of information patients want, how we impart information in a sensitive way and how we encourage patients to raise their concerns. It also deals with specific communication encounters; requests from relatives to withhold information and queries about prognosis.

### 17.45 – 18.10

# The surprise question – care of people in the last year of life

Dr Stephen Higgins Our Lady's Hospice and AMNCH, Dublin



### **Biographical Sketch**

Stephen Higgins qualified from University College Dublin in 1995 and worked as an SHO and Registrar in St James's Hospital before starting the palliative medicine SpR training scheme. Following completion of specialist training he worked as a Consultant in Palliative Medicine in St Joseph's Hospice, London before returning to his current post as Consultant in Palliative Medicine, Our Lady's Hospice & AMNCH in 2005. Interests include treatment of fatigue, renal palliative care and palliative care in underdeveloped countries.

## **Overview of Presentation**

Prognostication is difficult for all diagnoses and particularly for non-malignant conditions. However, without some idea of prognosis it is difficult for both patients and their health care professionals to plan appropriately. Failure to realise that a patient is nearing the end of life can lead to unrealistic expectations, futile treatments and ultimately a death which is not in keeping with the patient's preferences. Recent decades have seen increased medicalisation of dying and while this is often appropriate there are some for whom the question "what should be done?" is more pertinent than "what can be done?".

The suprise question – "would you be surprised if this patient died in the next 6-12 months?" is an imprecise but useful tool when assessing what patients might benefit from end of life care planning. It can act as a prompt in hospital or community settings and may lead to consideration of palliative approaches.

## 18.15 – 18.40

## Ethics and end of life care

Dr Regina McQuillan Beaumont Hospital and St Francis Hospice, Dublin



## **Biographical Sketch**

Regina McQuillan, FRCPI, is Palliative Medicine Consultant at Beaumont Hospital and St Francis Hospice where she is Medical Director. She has strong interest in Ethics and is Chair of the Clinical Ethics Forum at Beaumont Hospital and is a member of a number of Research Ethics Committees. She is also a member of the Ethics Working Group that took part in the revision of the Medical Council of Ireland guidelines.

## **Overview of Presentation**

This presentation will discuss some of the ethical issues that arise towards the end of life. These include requests for euthanasia, assisted suicide, palliative sedation and withholding/withdrawing of treatment. The presentation will address these ethical issues in light of the new guidelines from the Medical Council and also from the four principles approach to medical ethics (beneficence, non malfience, justice and autonomy).

# **UPCOMING SESSIONS in the 2009/2010 RCPI Masterclass Programme** will take place from 16.00 to 19.30 on the following dates:

Part IV:	Cardiology	3 March 2010
Part V:	Dermatology	7 April 2010
Part VI:	Endocrinology	5 May 2010
Part VII:	Nephrology	2 June 2010