



## What is palliative care and why is it important?

By **Susan Gravier**

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Physiotherapist Susan Gravier discusses the important role of physiotherapists in palliative care. Susan is a researcher at CareSearch which presents online evidence-based information and resources for palliative care tailored for health professionals, the aged care sector, and patients, carers and families.

'Cathy' has advanced cancer and is aware of the terminal nature of her condition. Following surgery, radiotherapy and chemotherapy, Cathy developed oedema of her right arm extending to her right breast, which caused significant pain and limited movement of her right arm. After pain, the most distressing part of this was her disfigured appearance and her inability to wear normal clothes.

The care team, including a physiotherapist, considered Cathy's psychological wellbeing when weighing up the benefits and risks of oedema management. Manual lymphatic drainage and bandaging techniques have reduced the oedema and enhanced Cathy's comfort. By prioritising the goal of reducing Cathy's distress, discomfort and disability, Cathy has been able to be as comfortable as possible in the final phase of her terminal condition, with her dignity always respected.

Cathy's story is an example of how allied health professionals including physiotherapists have an important role to play in the care and support of people living with a life-limiting condition. [Life-limiting conditions](#) can affect people of any age. While cancer is a commonly recognised life-limiting condition, there are others including dementia, cardiovascular disease, chronic respiratory diseases, diabetes, chronic liver disease, end-stage renal disease and neurodegenerative diseases (eg, motor neurone disease, multiple sclerosis, Parkinson's, muscular dystrophy and Huntington's).

People with a life-limiting condition can benefit from palliative care as their capacity for normal functioning may deteriorate rapidly and severely impact their quality of life and that of their family and carers.

The World Health Organization (WHO) defines [palliative care](#) as an approach to care that supports physical, emotional, social and spiritual needs of a person with a life-limiting illness. This definition includes the concept of quality of life, and highlights the importance of a team approach and the support of a person's family and carers. [The Australian Government National Palliative Care Strategy](#) and [Palliative Care Australia](#) have adopted the WHO definition of palliative care.

The time course or trajectory of life-limiting conditions are variable. Palliative care may be required throughout the course of a condition or towards the end of life, and involvement of allied health professionals will similarly vary according to individual needs.

[Physiotherapists](#) (may be involved in the relief of pain from musculoskeletal problems, the optimisation or recovery of strength and movement, or the management of breathlessness, fatigue or lymphoedema. A person feeling more comfortable or stronger may be able to maintain or regain independence in even simple daily activities. As Cathy's story illustrates, this can give enormous satisfaction, which is an important component of a person's sense of [dignity](#) and [quality of life](#).

People living with multiple chronic conditions and approaching their end of life can also benefit from palliative care. This is significant as approximately 11 million Australians have one of eight common chronic conditions (eg, arthritis, asthma, back pain and problems, mental or behavioural condition). Almost half of these people have two or more, and as many as seven out of 10 deaths can be directly attributed to [chronic diseases](#).

Older people approaching their natural end of life with multiple chronic conditions may have palliative care needs. Although their conditions may not be life-limiting, their state of health may be such that they are likely to die in the foreseeable future. The benefit of care of older people by allied health professionals is increasingly being recognised, and opportunities abound for the provision of services and innovative approaches to care.

Our ability to decide what is the best approach to providing palliative care and support will depend on keeping up with changing treatments and attitudes. Research and education can provide us with evidence to inform those decisions, so that the best approach is taken for each person.

Susan Gravier trained as a physiotherapist in Adelaide and worked in Victoria, Canada and Hong Kong. She is now a researcher in palliative care, having worked on healthy ageing and active ageing projects for many years. Susan is currently leading the allied health component of the CareSearch ([engagement project](#)) and palliAGED Engagement Project.

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