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Palliative, supportive, and hospice care: current challenges in medical education

I invite you to read Issue 2 Volume 17, 2023 of "Palliative Medicine in Practice", which contains five original articles, one review, and one short communication.

This Issue opens with an original article entitled "Health-related quality of life of relapsing or remitting multiple sclerosis patients: a case-control study" by Haniya Noun, Rami Atat, Georges Hatem, Roula Ajrouche, Sara Nahas, Maya El-Hajj, Salam Zein, and Sanaa Awada. Patients with multiple sclerosis (MS) report lower health-related quality of life (HRQoL) than other chronic disease populations. This study aims to identify risk factors of relapsing or remitting multiple sclerosis (RRMS) and assess its impact on HRQoL in Lebanese MS patients. A three-month case-control study was performed among 75 RRMS case patients recruited from two clinics in Beirut and 225 controls from the general population. Heavy cigarette smoking, moderate and heavy water pipe smoking, vitamin D deficiency, cardiovascular disease, and psychological disorders were significantly associated with RRMS. Linear regression showed that the MS international quality of life (QoL) global index significantly decreased with the number of relapses, the incomplete recovery between relapses, and the psychological disorder. Higher-income and physical activity had a positive effect on QoL. The findings of this study highlighted the risk factors of RRMS, which can be used for informed decision-making and tar-

ted awareness campaigns. Other factors affecting the HRQoL of MS patients should be considered to improve their experience throughout and after treatment.

The next original article in this Issue authored by Muhammad Yusuf Shaharudin is entitled "Audit on bedside chemical pleurodesis in a palliative care setting: Brunei experience". Malignant pleural effusion typically is a sign of aggressive and advanced disease with generally short life expectancy. This causes a lot of burdens symptomatically to patients with advanced malignancy. Hence, a lot of patients are made known early to palliative service to help optimise patients' symptomology. One of the procedures to help prevent the recurrence of symptomatic malignant pleural effusion is bedside chemical pleurodesis following thoracentesis. This audit aims to assess the efficacy and safety of doing the above procedure in a palliative setting. A retrospective electronic record of patients was reviewed from January 2020 until March 2022. Malignant pleural effusion was confirmed by cytological assessment of pleural fluid following chest tube drainage. Chemical pleurodesis was done by pleural fluid instillation of bleomycin, performed bedside by palliative physicians. Twenty patients were identified out of which 7 were male and 13 were female. The mean age was 69.2 with 55% of them suffering from lung malignancy. Complete response is seen in 45% and partial response is seen in 20%. The failure rate is at 35%. The complications were minimal with only

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5% of patients having fever and 10% having pleuritic pain. The audit shows bedside chemical pleurodesis performed by palliative physicians is as efficacious and safe compared to when it is done by other specialities. It helps improve symptoms in 65% of patients and thus improves the quality of life.

The third original article "Perception of patients with COVID-19 about respecting their dignity in hospital settings: a cross-sectional study" was written by Seyed Ahmad Bathaei, Iman Khahan Yazdi, Alireza Mirbagheri Gam, Maryam Naghipoor Far. Dignity therapy is a psychotherapy intervention whose main goal is to improve the quality of life, promote spiritual and psychological health, and reduce suffering in people with life-threatening diseases. Deteriorating health status is associated with low perceived dignity. The COVID-19 pandemic has been associated with growing concerns about the quality of health care. Therefore, the present study aimed to examine the perception of patients with COVID-19 about respecting their dignity in hospital settings and related variables. A cross-sectional study was conducted in 2021, on 206 patients with COVID-19 in hospitals. Patient Dignity Questionnaire (PDI) was used to collect data and descriptive and inferential statistics were used to analyse the data. The mean age of the participants was 54.83 ± 14.98 years and most of them were male (67.5%). The mean score of overall perceived dignity was 69.76 ± 10.62 out of 125. Participants rated 7 out of 25 items as 3 or higher, indicating the importance of these items in the clinical setting. The highest and lowest mean scores were in the dependence (3.28 ± 0.55) and social support (1.49 ± 0.59) subscales, respectively. The mean dignity score was associated with the patient's educational level and gender ($p = 0.012$) ($p = 0.065$). Patients with COVID-19 were concerned about respecting their dignity. The study patients were more concerned about the dimensions of symptom distress, existential distress, and dependence. Conducting training workshops on respecting human dignity in patients with COVID-19 can improve nurses' knowledge and skills in this area and promote respect for patient dignity.

The fourth original manuscript was entitled "Palliative care knowledge among final year medicine and health sciences students: a cross-sectional study" and was written by Muhammad Noh Zulfikri bin Mohd Jamali, Tan Wei Wern, and Kamala Krishnan. According to the World Health Organization (WHO), approximately 40 million people need palliative care each year. In the year 2020, an estimated 56.8 million adults and children experienced unnecessary suffering that can be managed and treated by palliative care. In the Malaysian context, the number of people requiring

palliative care is estimated to be 56,000 yearly, including all diseases. This increasing need for care requires study and increasing education of all healthcare professionals. There is a lack of studies on the medical students' knowledge of palliative care conducted in Malaysia and this study aimed to evaluate the knowledge of palliative care among final-year undergraduate medicine and health science students. This cross-sectional study targeted the final year students who are currently studying at universities in Klang Valley. The respondents were recruited using convenience sampling methods. A total of 102 responses were collected from the medical, physiotherapy, and nursing students, and the results showed that the participants had attained at least an average knowledge of palliative care. The limitation of the study was a small sample size, therefore, unable to represent the study population as a whole. In conclusion, all healthcare professionals should receive training in the basic knowledge and skill that they need as the healthcare institution should provide workshops or e-learning modules for students in their clinical postings and expose them to the principles of palliative care, to increase their knowledge and behaviour to dying patients.

The fifth manuscript is entitled "Teaching clinical communication skills in postgraduate medical education with particular emphasis on palliative medicine" and authored by Anna Ratajska, Agnieszka Nowakowska-Arendt, and Magdalena Zajac. Good communication skills are essential for an optimal doctor-patient relationship and also contribute to improved health outcomes. The need for training in communication skills is stated as a requirement in most countries. The study aimed to investigate the level of physicians' communication skills, their educational needs, and the effectiveness of teaching in this area in Poland. This study included 123 doctors representing various specialties and non-specialists. The need for physicians in learning skills to communicate with patients and their families was explored in a questionnaire survey. Physicians were asked what they would like to learn in the area of communication skills. It was demonstrated that there was a significant gap between physicians' expectations of their clinical communication skills training and the requirements of the curricula. The study has also confirmed the need to tailor curricula to the educational needs of physicians, especially when they have experienced differentiated education. In conclusion, it is reasonable to modify the existing clinical communication curricula bearing in mind that communication skills training requires approaches which are different from that of teaching other clinical subjects.

The review manuscript is entitled "Accessibility and challenges of perinatal palliative care in Poland" by

Urszula Tataj-Puzyna, Beata Szlendak, Izabela Kaptacz, Dorota Sys, Maria Węgrzynowska, and Barbara Baranowska. This study aimed to explore the legal status and level of accessibility to perinatal palliative care (PPC) in Poland, with a focus on the number of services provided and the number of parents receiving PPC services. The desk research was based on information obtained from the National Health Fund regarding the number of units that signed a contract for the provision of guaranteed PPC services from 2018 to the first half (January–June) of 2022; the number of parents receiving the service from 2018 to 2022; and the number of services provided by a doctor, a psychologist and by primary care midwives (PCMs). In addition, the Map of Health Needs and National Transformation Plan data were used to prepare the data. In Poland, since 2018, PPC services have been provided with public funds under contracts signed with the National Health Fund. Since 2022, those type of services has been provided by 17 centres. Care was provided to 1,860 pregnant women diagnosed with lethal foetal anomaly and to four fathers. There are still voivodeships in which there is a lack of provision of PPC services that are financed from the state budget. In Poland, there is no full accessibility to publicly funded PPC in every voivodeship. The lack of a sufficient number of PPC centres and the lack of a uniform national standard of practice for this type of care — provided in hospices, hospitals and home settings — prevents women from having continuity of professional perinatal care. There is a need to ensure the quality of the services provided and make progress towards the employment of midwives in PPC facilities by service providers to ensure that women receive obstetric care from the moment of an adverse diagnosis, professional preparation for childbirth and the postnatal period.

In a short communication Andreas Stähli and Halyna Lejzjus introduce to Readers of our journal “The Institute for European Hospice Partnerships: idea, vision, mission, and first steps of its development”. Against the background of a European research study in the field of palliative care lasting several months and the experiences of a five-year international hospice partnership, the founding idea for an Institute dedicated to the presentation and promotion of bilateral cooperation of specialized services in palliative care emerged. The goals, as well as the vision, mission and tasks of this Institute for European Hospice Partnerships, are described and the significance of a research project important for its development is named.

Education is an important issue in palliative care [1] at both undergraduate [2, 3] and postgraduate levels [4]. Recently a curriculum for specialty training in pallia-

tive medicine for physicians in Poland was revised and published, which refers to those doctors who started training this spring and will begin training in the future [5]. Members of the Expert Group of Palliative Medicine of the Postgraduate Medical Education Centre who elaborated a new curriculum in palliative medicine strongly believe that it will improve the quality of the specialty training, including the knowledge, skills and attitudes of doctors who will complete it and become consultants in palliative medicine. Physicians may choose training right after a postgraduate internship (residency) which last 4 years (including two years of a basic module on internal diseases followed by two years specialty module in palliative medicine). This path is also possible for those who have completed a basic module in paediatrics. However, most physicians choose out of residency 2 years specialty module in palliative medicine, which is possible if they possess another medical specialty completed (e.g. internal medicine, oncology, neurology, etc. — a complete list of specialties is available at a program of specialty in palliative medicine at Postgraduate Medical Education Centre website).

The revised program of the palliative medicine specialty module includes 4 internships: in-patient palliative medicine unit or stationary hospice (185 working days for residency or 180 working days for out of residency path), home hospice (palliative care home care team) combined with out-patient palliative medicine clinic (together 175 working days), oncology (20 working days) and neurology (20 working days). Trainees have also to complete 10 courses for residency or 12 courses for out of residency path during the specialty module training, which ends with a state specialization exam including a written test and oral exam if the degree on the written test is below good. Ever since 2003 when the first 55 physicians become palliative medicine specialists, a total of 668 physicians successfully passed a state exam and nearly all of them become palliative medicine specialists with only a few who are still in the training. However, it is estimated that we need to double the number of palliative medicine specialists to provide adequate availability of specialist palliative care for all patients and families who are in need in Poland.

Several important events were held recently. A Conference “It’s only palliative care, but I like it” was held in Palermo on 20–22 April 2023. The 18th World European Congress of Palliative Care “Equity and Diversity” was held in Rotterdam on 15th–17th June 2023. As a follow-up event in Poland 16th International Conference of Palliative Medicine in Practice (After the 18th EAPC World Congress 15–17th June 2023 in Rotterdam) took place on 23rd–24th June 2023 in Gdańsk. Among many distinguished Speakers of this Conference

Professor Sebastiano Mercadante who has been recently acknowledged with the Clinical Impact Researcher Award at this EAPC World Congress in Rotterdam on 16th June 2023 presented an Inaugural Lecture on guidelines of the American Society of Clinical Oncology (ASCO) on the use of opioids in adult cancer patients with pain [6].

Please find a Supplement I, vol. 17 (2023) on a journal web: https://journals.viamedica.pl/palliative_medicine_in_practice/article/view/95326/71442 with all abstracts (in Polish) presented during 4th Student Conference of Palliative Medicine held at Medical University of Gdańsk on 29th April 2023.

We cordially invite all of our Polish Colleagues to participate in the Second Conference in Zielona Góra: "Palliative medicine, supportive care and pain management in cancer patients", which is planned for 8th–9th September 2023. This Conference is organized by the Chair of Palliative Medicine at the Institute of Medical Sciences of the Collegium Medicum of the University of Zielona Góra and Professor Jacek Łuczak Polish Association for Palliative Care. More information including program and registration can be found at: <https://konferencja.ptop.edu.pl/>. We cordially invite you to Zielona Góra, which will also celebrate its 700th anniversary of the creation of this city along with a vintage and days of Zielona Góra which would start on the 9th of September 2023. The First Conference held on 6th–7th October 2022 was devoted to patients with non-malignant diseases [7]. This year's Conference would be concentrated on cancer patients.

I invite all of you to read articles published in this and archived Issues and share your knowledge and experience by through sending your manuscripts (also in the Polish language) regarding broadly understood

palliative, supportive and hospice care. Detailed information can be found at: https://journals.viamedica.pl/palliative_medicine_in_practice.

With cordial greetings,
Wojciech Leppert

References

1. Kirkpatrick AJ, Donesky D, Kitko LA. A systematic review of interprofessional palliative care education programs. *J Pain Symptom Manage.* 2023; 65(5): e439–e466, doi: [10.1016/j.jpainsymman.2023.01.022](https://doi.org/10.1016/j.jpainsymman.2023.01.022), indexed in PubMed: [36736863](https://pubmed.ncbi.nlm.nih.gov/36736863/).
2. Durojaiye A, Ryan R, Doody O. Student nurse education and preparation for palliative care: a scoping review. *PLoS One.* 2023; 18(7): e0286678, doi: [10.1371/journal.pone.0286678](https://doi.org/10.1371/journal.pone.0286678), indexed in PubMed: [37399170](https://pubmed.ncbi.nlm.nih.gov/37399170/).
3. Noguera A, Bolognesi D, Garralda E, et al. How do experienced professors teach palliative medicine in european universities? A cross-case analysis of eight undergraduate educational programs. *J Palliat Med.* 2018; 21(11): 1621–1626, doi: [10.1089/jpm.2018.0071](https://doi.org/10.1089/jpm.2018.0071), indexed in PubMed: [29985742](https://pubmed.ncbi.nlm.nih.gov/29985742/).
4. Stähli A, Stiel S, Paal P, et al. Postgraduate palliative care education and curricular issues in Central Asia, Eastern and South-Eastern Europe: Results from a quantitative study. *Palliat Med Pract.* 2020; 14(2): 81–88, doi: [10.5603/pmpi.2020.0008](https://doi.org/10.5603/pmpi.2020.0008).
5. Medycyna paliatywna (0750). <https://www.cmkp.edu.pl/ksztalcenie/podyplomowe/lekarze-i-lekarze-dentysty/modulowe-programy-specjalizacji-lekarskich-2023>. (30.06.2023).
6. Paice JA, Bohlke K, Barton D, et al. Use of opioids for adults with pain from cancer or cancer treatment: ASCO guideline. *J Clin Oncol.* 2023; 41(4): 914–930, doi: [10.1200/JCO.22.02198](https://doi.org/10.1200/JCO.22.02198), indexed in PubMed: [36469839](https://pubmed.ncbi.nlm.nih.gov/36469839/).
7. Loroch G, Leppert W. Report of the First Conference in Zielona Góra: Palliative medicine, supportive care and pain management in patients with non-cancer diseases. *Palliat Med Pract.* 2022; 16(4): 250–252, doi: [10.5603/pmpi.2022.0031](https://doi.org/10.5603/pmpi.2022.0031).