

ESMO Palliative Care Fellowship (May 2019 – June 2019)

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FINAL REPORT

Home Institute: Ministry of Health, Sri Lanka-District General Hospital, Vavuniya

Host Institute: Chelsea and Westminster Hospital Foundation Trust

Mentor: Dr. Ruth Caulkin and Dr. Sarah Cox

Introduction

Since palliative care is still an emerging field in Sri Lanka, there are no consultants specialised in the field. The relevant consultant manages the patients with the input from other specialties when necessary. Also, most of the malignancies present in advanced stages necessitate the palliative care input. Therefore, the main aim was to have a sound knowledge of the basics of palliative care and to see the function of a well-established palliative care unit in a developed country.

Goals or aims

1. Knowledge on managing the common symptoms encountered by the oncology patients such as pain, nausea and vomiting, constipation, breathlessness, etc.
2. A thorough understanding of different opioids, when to use which and conversion between opioids, management of opioid toxicity and its use in special situations such as in renal compromised patients.
3. Management of clinical, as well as psychosocially complex situations, approaching difficult conversations regarding breaking bad news, treatment withdrawal, discussions on DNACPR.
4. Function of a palliative care unit and hospice

Description of the time spent at host institute

The above aims were met by shadowing consultants in palliative care, Dr. Ruth Caulkin and Dr. Sara Cox in clinics and ward rounds, shadowing SpRs Jenny and Gaya and the Clinical Nurse Specialists' and the rest of the team. The palliative care guidelines book was also a wealth of information and I found it very useful.

In addition, they were met by participating in the acute oncology handover, the combined oncology clinics and by participating in MDTs.

The day at Trinity Hospice helped to understand the services provided by the hospice for palliative care patients and how a hospice functions in a developed country. I also experience the services provided by the community palliative care team and their integration into the oncology service.

The visit to the Macmillan centre was useful in terms of knowing the additional support that is available for oncology patients.

Conclusion

I gained a thorough basic knowledge of symptom management, opioid use and conversions, basic principles of palliative care, managing difficult clinical situations, as well as psychosocial consultations.

I was impressed by the difference and benefit of early intervention by the Palliative Care Team, not only on patients and the relatives' quality of life, but on the continuation of oncology treatment more effectively. This is my main take home message.

Acknowledgments

I am so grateful to Dr. Ruth and Dr. Sara, SpRs Jenny and Gaya, all the doctors and the Clinical Nurse specialists who helped me during the fellowship despite their very busy schedule, thank you for making me feel at home.

Thank you very much to Dr. Ruth for having me at Chelsea. I feel much more confident in managing oncology patients with the knowledge and experience I gained during my fellowship.

I am also ever so grateful to ESMO for giving me this wonderful opportunity to learn about palliative care. It will help me immensely in managing my patients in need of palliative care input, which consists of a major bulk of my clinical practice. I hope the knowledge and experience I gained will make a change to the betterment of my patients.

