

What is End-of-Life Care?

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We all know how precious life is, and we can all feel for family members who lose a loved one, or perhaps, we know how painful it is to lose a loved one ourselves. Those who have experienced being with somebody at the end of their life, will recognize that dying with dignity shouldn't be a luxury, but rather, a common good that every person should have access to. Therefore, the establishment of good and dignified End of Life Care (EoLC) is the aim that many health care systems worldwide are striving for.

End of life care is offered to patients with advanced, progressive, incurable illness, and seeks to enable patients to live as well as possible until they die¹. EoLC provides palliative and supportive care for both patient and family, by identifying and meeting their needs throughout the last phase of life and into bereavement. Not only does it include symptom management, but it also focusses on emotional, psychosocial and spiritual support.

End-of-life care has received ever-increasing attention and demands since the pioneering studies of Elisabeth Kübler-Ross on death and dying in the 1960s². Globally, we are facing with a rapidly growing ageing population. It is predicted that about 1.5 billion people, representing 16% of the world's population, will be aged 65 or older by 2050 (National Institute on Aging (NIA) National Institutes of Health (NIH), 2015). In Hong Kong, where life expectancies have steadily increased and population aging is a reality, it is projected that one in three persons will be elders (aged 65 or above) by 2041³. With a rising trend of chronic disease and disability among the elders, there is thus an urgent need in end of life care not merely for older people or people with terminal illness, but also for their families and caregivers.

To improve the end-of-life care quality, and to preserve dignity and autonomy of people suffering from a terminal illness, health care professionals have increasingly realized the importance of competent care at the end of life. Besides providing adequate symptom

¹ Saunders Dame Cicely, *End of Life Care Strategy*, Department of health, 2008

² Elisabeth Kübler-Ross, *On death and Dying*, 1969 by Simon & Schuster/Touchstone.

³ Census and Statistics department. *Population ageing in Hong Kong: Challenges and opportunities*, <http://hkeconomy.gov.hk.2013>.



management (e.g., management of pain, dyspnea, fatigue, etc.), which is an important aspect of EoLC, increased attention has been given to EoLC care that focuses on comfort rather than cure. It also includes support for the patients' families, both during the patients' illness and when he/she has passed away.

To preserve dignity and independence of people nearing the end of life, it is also important to talk openly with the patient about their end-of-life plan. That is why, for example, end of-life care emphasizes the importance of expressing a patient's preference for life extending care, such as cardiopulmonary resuscitation or mechanical ventilation. If such processes ever become necessary, it is important for families and healthcare providers that they know the patient's wishes ahead of time. Being aware of their loved ones' wishes will prevent families from having to make major end-of-life decisions on behalf of the patient, which may even prevent them from additional burden and prolonged grieving.

Good quality, dignified end-of-life care is a specialized type of care that our ageing society will heavily rely on. We all wish for a good life, and with that, we wish for a good end of that life as well. Both for ourselves and for the ones we love. End-of-life care can assist us in making a "good death" a reality for everyone, and that is why end-of-life care, and recognizing its importance, is crucial for all of us.