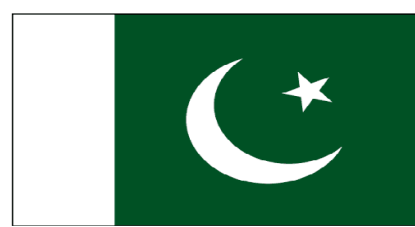




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Universitätsklinikum
KREMS



ESMO Palliative Care Fellowship (March 2019)

Dr. Basir Muhammad

FINAL REPORT

Supervisor: **OÄ Priv. Doz. Dr. Gudrun Kreye**

Sponsor: **ESMO (European Society for Medical Oncology)**



Home Institute:

SINOR Cancer Hospital
Marghuzar Road
Saidu Sharif, Swat
PO Box 50
Swat, Khyber Pakhtunkhwa
Pakistan

Host Institute:

Universitätsklinikum Krems,
Mitterweg 10, 3500 Krems
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DVR- Nummer : 2112072



Host Institute Introduction (ESMO Website)

Centre History

The division of Hematology and Oncology is embedded in the Department of Internal Medicine and was implemented in 2008 and became an independent department in late 2013.

The palliative care team was founded in 2003 by nurses from the Department of Internal Medicine, who were working frequently with oncology patients. In 2006, a ward for palliative care patients, which includes six beds, was implemented.

Department Profile

The Palliative Care Unit is embedded in the Department of Internal Medicine and works in close cooperation with the Division for Hematology and Oncology. The PCU ward offers six beds for palliative patients. The palliative care team consists of:

- Three medical doctors, two of them working full time, one part-time
- 14 nurses, 12 working on the ward, four involved in the support- and mobile team. Two nurses are working on the ward and in the support- and mobile team
- One psychologist, 30 hours
- A social worker who is available on demand during office hours
- A nutritionist is involved in monitoring patients' needs concerning nutritional supplements, enteral and parenteral nutrition
- A volunteer team, consisting of 13 members

The Division for Hematology and Oncology consists of an inpatient department (18 beds) and an outpatient department. The departments of ENT, gynecology and Pulmonology also treat oncologic patients, but have to get consent of the weekly tumor board before they start medical oncologic treatment. The Division for Hematology and Oncology works in close cooperation with the Department of Radiotherapy and Radio-oncology.

According to research and education, our Centre is involved in clinician studies and continuous lectures to keep levels of research and training as high as possible.

Areas of Specialization

The "Landeskrankenhaus Krems", which is one of the largest hospitals in Lower Austria, Austria, provides 480 beds and offers in- and outpatient services. Included in the hospital are departments for anesthesiology and critical care, surgery, gynecology and obstetrics, ENT, internal medicine, pediatrics, orthopedic surgery, pulmonology, trauma surgery, urology and radio-oncology.

The Centre is able to provide all necessary emergency care for patients with advanced cancer. Since all beds in our hospital are available on a 24/7 basis, we can always guarantee admittance to all our patients in our hospital in case of emergency.

Palliative and Supportive Care

The palliative care and support team consults and visits all palliative patients who are admitted to other wards in the hospital. Additionally, the team visits patients at home, and networks with home care services and GPs. Once a patient is admitted to the PC team, he will be followed and visited every time he comes to our hospital, even if he is admitted at another department. The team also takes care for the needs of the relatives. We also offer supportive care services to curative patients, when they are in need of pain or symptom control concomitantly to oncologic therapy.

Our philosophy is to include palliative care as early as possible in the care of oncology patients. For us, it seems important that the patients are used to the members of the PC (palliative care) team, so that they will not get the impression that the PC team is the "last option" for them, and that the appearance of a palliative care physician is not automatically related to death and dying. We often admit patients in an early stage of their disease on our PC ward to achieve symptom control, so that they get familiar with our team.

With this visit I aim to:

- Develop my skills in the comprehensive assessment of pain and other symptoms from cancer and its treatment, monitoring patients for adequacy of pain relief and titration of opioids.
- Integrate the different multidisciplinary therapeutic strategies in palliative care.
- Improve the quality of palliative care services offers to patients at my Institution.

Details of Time Spent

My fellowship had the duration of one month, 1st March, to 31st March, 2019. During these 30 days, I have followed OÄ Priv. Doz. Dr. Gudrun Kreye in her daily activities at the Inpatient Palliative Care Unit. I regularly attended the multidisciplinary morning meetings, Ward rounds and Ward internal meetings. I had the opportunity to observe carefully treating patients with acute symptoms, including breakthrough pain, and to be familiar with titration of opioids and with other frequent medication management such as neuroleptics, antiemetics and anxiolytics.

In order to learn more about palliative home care, I also spent one day with Dr. Beate Stichfrom Palliative Home Care Team. Their mission of the PHCTs is to assist primary care physicians in monitoring patients who meet the established criteria for terminal illness. I was able to visit several patients, allowing me to understand that it is possible to provide care to home care patients who are not eligible for or accepting of hospice, but still need a holistic approach to alleviate physical, psychosocial and spiritual concerns when facing a life limiting illness.

Although I was focused on Palliative Care, I could not forget Medical Oncology and Radiation Oncology. I was allowed to attend clinical sessions and tumor Boards weekly. I was also presented with a complete round to Medical Oncology unit, Radiation Oncology unit, and Palliative Care Unit of the Institute.

I spent 4 days in medical Oncology unit with OÄ Priv. Doz. Dr. Gudrun Kreye and participated in morning meeting, ward rounds and meeting with nurses. Also I observed the administration of palliative chemotherapy and management of side effects from Chemotherapy.

I was also allowed to spend one day in Radiation oncology unit UK krems Hospital, with Dr. Prim. Assoc. Prof. Mag. Dr. Anja Bayerl. I attended the morning meeting and then observed the Simulation, Planning and treatment delivery on LINAC Varian, for Palliation as well as radical treatment.

During my stay at Universitätsklinikum Krems, I was also included in the Team Discussions. It was a great opportunity to refresh my knowledge about the updated treatments about symptom management and also training and improving different methods of communication with patients.

Conclusion

In conclusion, it is extremely important not only to treat the disease but also to treat the patient. Palliative care and symptom management in particular, is an integrated part of medical oncology, and it has a multidisciplinary dimension. Oncologists and oncology trainees should know what supportive therapy during anticancer therapy is, should be able to use it and to determine when palliative care is indicated. I cannot imagine a better way to fulfill these goals than being a month with OÄ Priv. Doz. Dr. Gudrun Kreye and all her team. إن شاء الله تعالى وبتوفيق الله تعالى I hope I can apply most of this knowledge in my Hospital, helping to develop the palliative care team, and offer more and better services to my patients.

Acknowledgement

First of all, I am sincerely thankful to my Allah Almighty for his uncountable blessings upon me, who give me the opportunity, made things easy for me, and helped me to complete all the things easily. And blessings of Allah Almighty upon our beloved Prophet Muhammad (Peace and blessing of Allah be upon Him), who was sent as a mercy for all the universe.

A special thanks to OÄ Priv. Doz. Dr. Gudrun Kreye, Prim. Univ. Prof. Dr. Martin Pecherstorfer, and Dr. Maria-Magdalena Klausner for having me and showing me how is possible to work on improving patient's quality of life both with high academic level and professionalism but mostly with love.

I have to thank, to all the consultants in Palliative Care who I met and all their staff, doctors and nurses of Palliative Care Unit, Universitätsklinikum Krems.

I am also thankful to Dr. Prim. Assoc. Prof. Mag. Dr. Anja Bayerl and her team for sparing the time for my learning at Radiation Oncology Department.

Finally, I have to thank ESMO Palliative Care Working Group for this valuable opportunity that was given to me. I hope to return this award, treating oncology patients the best possible way.