



European Medical Students' Association

Association Européenne des Étudiants en Médecine

emsa-europe.eu | Rue Guimard 15, 1040 Brussels | info@emsa-europe.eu

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Palliative and End-of-life Care Policy Paper

Authors: Alexandra Castro Silva; Viktoria Pinhammer; Joanna Farnicka

The European Medical Students' Association (EMSA) represents medical students across Europe. We envision a healthy and solidary Europe in which medical students actively promote health. EMSA empowers medical students to advocate health in all policies, excellence in medical research, interprofessional healthcare education and the protection of human rights across Europe.

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Rue Guimard 15

1040 Brussels, Belgium

Tel : +32 2732 72 02

www.emsa-europe.eu

info@emsa-europe.eu

Problem statement

According to the World Health Organization (WHO) palliative care is a holistic care approach for patients who are suffering from a terminal illness with a focus on alleviating the patients' pain and their surrounding symptoms like dyspnea and obstipation in order to improve their quality of life and support their families (WHO, 2024). In addition, it is a multifaceted practice since one seeks to support the patient medically, socially or spiritually. Therefore, a multidisciplinary team that includes physicians, nurses, support workers, paramedics, pharmacists, physiotherapists, and volunteers is needed (WHO, 2023).

This is especially relevant since an estimated 4.4 million people in the WHO European Region including 14,000 children are in need of palliative care annually, yet it is still oftentimes classified as a neglected or even taboo topic in the medical field. With the increase in life expectancy and non-communicable diseases it is a number which will only grow in the near future (EACP Press, 2019; WHO, 2023).

Firstly, the European Union is facing several palliative care related problems, for example the restrictive regulations for opioids even in a palliative setting, or the poor medical infrastructure resulting in not enough hospices and palliative care units in hospitals. In addition, the overall poor public awareness has led to several misconceptions among the public due to their social or cultural background, thus making education a central part of the solution (WHO, 2023). The most common misconceptions include:

- that palliative care is just needed for cancer and not illnesses like cardio-vascular and chronic respiratory diseases
- that palliative care only starts during the patients last weeks instead of the moment the patient is diagnosed with a terminal illness
- and lastly that opioids lead to an increase in substance abuse rather than being a necessary step in the patients' pain management (WHO, 2020; WHO, 2023; Maria dos Anjos Dixe et al., 2020)

Furthermore, it is concerning that many medical and nursing students in Europe lack sufficient training in palliative care, as the subject is not mandatory in numerous universities (EAPC, 2019).

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Moreover, official accreditation processes for physicians specializing in Palliative medicine are only established in 29 European countries (WHO, 2023). Aside from offering a more holistic training for medical personnel, this is also essential for strengthening the patient's autonomy and dignity, and to help them make an informed decision about their end-of-life treatment (Adam Houska and Martin Loučka, 2019).

Additionally, while 20 EU and nine non-EU countries have adopted palliative care legislation, several nations lack national health policies that integrate palliative care into their health systems (Woitha et al., 2015). Taking into account that palliative care is a part of the human right to health, the lack of these systems to make palliative care widely accessible is concerning (WHO, 2020).

Our view. Aim

EMSA recognizes the importance of palliative care especially in the context of the aging population in the majority of European countries, where the need for sensitive, applicable, and collaborative end-of-life care is steadily increasing. Therefore, EMSA wants to advocate for initiatives that emphasize the need for a cultural shift within healthcare settings towards more patient-centered care, integrating the wishes and concerns of patients and families into the planning alongside with the delivery of care and promoting open, and compassionate conversations about end-of-life care as standard practice.

Furthermore, in line with EMSA's commitment to medical education, the focus on education and empowerment of healthcare professionals in palliative care is paramount. In this context EMSA highlights the importance of giving providers the tools to navigate the challenges posed by demographic shifts towards an older population with grace, empathy, and competence.

Moreover, EMSA recognizes the complexities of symptom management, particularly in pain assessment and management for patients unable to communicate their needs, for which healthcare professionals need to be adept in both technical and emotional aspects of care.

Further aligning with these paradigms, policy papers from the EMSA advocate for inclusive healthcare reforms. These emphasize the integration of digital health proficiencies within the medical

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curriculum and acknowledging the imperative for future healthcare professionals to be adept in both the emerging digital landscape and the traditional, humanistic aspects of patient care.

Recommendations

EMSA calls on the United Nations and WHO to:

- Follow up on guidelines like the “Global Resolution on Palliative Care” (WHA67.19, 2014) so that they give a feasible framework for countries to improve the access to palliative care and better integrate it in their healthcare structures, while taking the challenges of different countries into account;
- Facilitate the creation of an international network that helps advance palliative care through knowledge and resource allocation, and exchange, so that developing countries can get direct help.

EMSA calls on Student Organisations to:

- Organize events in collaboration with experts in the area to inform medical students;
- Use their resources to bring the topic forward in important discussions.

EMSA calls on governments, ministries of health and governmental organizations to:

- Develop and implement policies to make palliative care a part of their national health-care system and increase the correct implementation and wide availability of palliative care;
- Increase funding and support for palliative care, including but not limited to ambulatory palliative care teams for the patients to be treated at home;
- Provide mandatory training for healthcare professionals about the importance of an early implementation of palliative care besides treatments, in order to improve the quality of life for patients suffering a life-threatening illness;
- Make sure that opioids are available for palliative care patients, as per international conventions on access to essential medicines.

EMSA calls on medical faculties and ministries of education to:

- Integrate more content about palliative care in the medical school curriculum that can include, but is not limited to, obligatory lectures and workshops;
- Promote visits to palliative care stations or hospices as part of the coursework of medical students;

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- Encourage students to voluntarily complete clinical rotations in the area of palliative care.

EMSA calls on hospitals and healthcare professionals to:

- Ensure access to palliative care for all patients in need of emergent care as soon as needed, regardless of their financial status as intended as part of the principles of universal health coverage;
- Create connections to local palliative care networks that can help sensitize the doctors on the topic and who are reachable in case of doubts;
- Make sure their hospitals and individual teams and doctors have a current overview of the palliative care options and resources in their area;
- Reach out to primary health-care providers so that they can coordinate the access to palliative care after the patients are discharged from the hospital.

EMSA calls on EMSA, FMOs and NGOs to:

- Implement campaigns to inform the population of the real meaning and extense of palliative care, as well as the misconceptions in palliative care and the use of opioids for pain control in palliative patients, for example as a part of the World Palliative Care Day on the 9th of September established by the Worldwide Hospice Palliative Care Alliance;
- Plan workshops and lectures to inform medical students about the topic and the scope of implementation in their practice, including the correct use of opioids in a palliative care concept;
- Encourage individuals to get familiar with the available resources and their rights to access them.

EMSA calls on medical students to:

- Use the opportunities available to them to learn more about the topic and get involved in workshops, lectures, seminars, etc. to raise awareness;
- Advocate in their medical faculties for the topic of palliative care to be more integrated in the curriculum.

Abbreviations

EAPC = European Association for Palliative Care

EMSA = European Medical Students' Association

EU = European Union

FMO = Faculty Member Organization (of EMSA)

NGO = Non-Governmental Organization

WHA = World Health Assembly

WHO = World Health Organization

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