

*Commentary***Scope of palliative care and medical treatment**

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DESCRIPTION

Palliative care (from the Latin root 'palliare', which means 'to cloak') is a multidisciplinary medical caretaking approach aimed at improving quality of life and reducing hardship in people who are suffering from serious, complex illnesses. Many definitions of palliative care can be found in the literature. Palliative care is defined by the World Health Organization (WHO) as a method to raising the usual of living of patients who are facing issues associated with life-threatening illnesses, through the prevention and relief of suffering through early detection and treatment of pain and other physiological, sociological, and spiritual problems. Palliative care used to be a disease-specific approach, but the World Health Organization now recommends that the principles of palliative care be applied as soon as possible to any chronic and ultimately fatal illness. Palliative care is suitable for persons of all ages who are really suffering from serious illnesses, and it can be given as a stand-alone treatment or in combination with healthful treatment. Physicians, nurses, occupational and physical therapists, psychologists, social workers, chaplains, and dietitians are among the members of an interdisciplinary team that provides it. Palliative care can be delivered in a variety of settings, including hospitals, outpatient clinics, skilled nursing facilities, and patient homes. Palliative care, while an important part of end-of-life care, is not limited to those nearing the end of their lives. The efficacy of a palliative care approach in improving a person's quality of life is supported by evidence. The primary goal of palliative care is to improve the quality of life for people who are suffering from chronic illnesses. Palliative care is most commonly provided at the end of life, but it can be beneficial for anyone at any stage of a critical illness or at any age.

Palliative care's overall goal is to improve the quality of life of people who are suffering from a serious illness, which is defined as any life-threatening condition that reduces an individual's

daily function or quality of life, or increases caregiver burden, by managing pain and symptoms, identifying and supporting caregiver needs, and coordinating care. Palliative care is not limited to people receiving end-of-life care and can be provided at any stage of illness alongside other treatments with curative or life-prolonging intent. Palliative care services were once limited to people with incurable cancers, but the framework is now being applied to diseases such as severe heart failure and chronic obstructive pulmonary disease. Palliative care can be started in a variety of places, including emergency rooms, hospitals, hospices, and even at home. Palliative care should be started at the time of diagnosis or when disease-directed options fail to improve a patient's prognosis in some severe disease processes, according to medical specialty professional organizations. Patients with advanced cancer, for instance, must be "referred to multidisciplinary palliative care teams that provide hospitals and medical care early in the course of the disease, alongside treatment response of their cancer". Including palliative care providers in treating patients improves overall control of the disease, standard of living, and family satisfaction while lowering overall healthcare costs. Common medications can be used in palliative care, but they are used for different indications based on established practices with varying degrees of evidence. Antipsychotic medications are used to treat nausea, anticonvulsants are used to treat pain, and morphine is used to treat dyspnea. Because many people in palliative care lose their ability to swallow, administration routes may differ from acute or chronic care. Subcutaneous administration is a popular alternative to intravenous administration because it is less traumatic and easier to maintain. Sublingual, intramuscular, and transdermal administration are also options. Medications are frequently administered at home by family members or nursing staff. Palliative care interventions in nursing homes may help residents with dementia feel better and improve family members' health.

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