

Editorial

Palliative Care Services: A Major Requirement in Indian Context

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The WHO defined palliative care as “an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial, and spiritual” [1]. Palliative care is the holistic care of the dying cancer patient and any patient with a chronic life limiting illness. The aim of palliative care is to reduce suffering and facilitate a dignified and humane death [2]. Palliative care specialists treat people suffering from serious and chronic illnesses, including cancer, cardiac disease such as Congestive Heart Failure (CHF), Chronic Obstructive Pulmonary Disease (COPD), kidney failure, Alzheimer’s, Parkinson’s, late stage HIV/AIDS and many more [3].

India faces the dual burden of communicable diseases and chronic Non-Communicable Diseases (NCDs). Though India doing a fairly good job in addressing the communicable diseases, burden of NCDs is increasing due to multifactorial reasons. NCDs are the leading cause of mortality, morbidity in India. Based on available evidence cardiovascular diseases (24%), chronic respiratory diseases (11%), cancer (6%) and diabetes (2%) are the leading cause of mortality in India [4]. Cancer and other Non Communicable Diseases have emerged as major public health problems in India. Increases in the aging population and prevalence of advanced cancer are common. It is estimated that one million new cases of cancer occur each year in India, with over 80% presenting at stage III and IV [5]. India’s National Health Profile 2013, projected that by 2020 India will see a 21% rise on an average in the incidence of cancer with a 19% increase in cancer among men, and a 23 % increase among women. Data from 25 population-based registries across the country was analysed and extrapolated to reach the projections. The incidence of mouth cancers will rise by 51%, 48% increase in the incidence of prostate cancers, 31% for liver cancers and 22% for lung cancers. Cancers of the brain, hypopharynx and oesophagus will dip very marginally. Gall bladder cancers will increase 45%, and ovarian cancers 28%. All cancers are projected to rise in women, including cervical and breast cancers, which will continue to be the two most common types [6]. India has the third largest HIV epidemic in the world. In 2013, HIV prevalence in India was an estimated 0.3%. This figure is small compared to

most other middle-income countries but because of India’s huge population this equates to 2.1 million people living with HIV. In the same year, an estimated 130,000 people died from AIDS-related illnesses [7].

The need of palliative care in India is immense. Every hour more than 60 patients die in India from cancer and in pain. Moreover, with a population of over a billion, spread over a vast geo-political mosaic, the reach of palliative care may appear insurmountable. It is estimated that in India the total number who need palliative care is likely to be 6 million people a year [8]. Palliative care has limited coverage in India. Obstacles in the growth of palliative care in India are too many and not only include factors like population density, poverty, geographical diversity, restrictive policies regarding opioid prescription, workforce development at base level, but also limited national palliative care policy and lack of institutional interest in palliative care. There is also extremely poor awareness about palliative care amongst the cancer patient’s caregivers. Pandve et al conducted a pilot survey was to determine awareness regarding palliative care among the cancer patients and their relative who had visited one of the tertiary care teaching hospitals in Pune, Maharashtra. All the 47(100%) participants participated in the survey responded that they were not aware about the palliative care, to which it is required. Similarly all those responded never heard about availability of any centers providing palliative care [9].

To conclude, palliative care is in its infancy in India which needs to be developed rapidly. Its importance must be highlighted to the policy makers as well to the general population. There is a huge need to expand palliative care in the India to address an ever increasing demand for its use.

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