

Palliative Care Submission

I wish to have the following aspect of Palliative Care to be incorporated into this Senate Enquiry. Palliative Care needs more funding and each Public Hospital should have its own Unit therein. Where will the money come from?

If you give serious consideration to this proposal, the freeing up of beds, staff and money would be enormous.

The patient is put in the Palliative Care Team for pain management and allowed to die with dignity.

I have been involved in two such cases, My wife who took just under 3 weeks to pass away on 7/01/12 and my father in law took 12 days dying on 26/08/11

She had terminal Leukaemia, all medical treatment was a slow form of torture, in her final days. She was given no fluids, food etc, just drugged up to the extent where she could not talk or move, but still knowing what was happening around her. My daughter and I kept a 24 hour vigil around her side every day for almost 3 weeks, as the nurses may do their check once every couple of hours, but she could be in pain a few minutes later and if we were not there, they would report she is resting peacefully.

Did you know that even when a person on life support has all equipment disconnected and turned off, it can take up to 10 days for them to die. In palliative care hospital patients it is not unusual for patients who have had all treatment stopped to take up to 3 to four weeks to die. This is called humane treatment, yet others call it torture by the system in place.

My father in Law had a fall and suffered 2 ring fractures on his hips, was 88 years old and had early signs of dementia plus numerous other ailments including cancer. After a lengthy discussion with Hospital Specialists, family and himself it was agreed by all that no further treatment would be administered and that he would receive Palliative Care and pass away peacefully. Can you imagine

the pain he had to endure every time he was even turned slightly and later on every 4 hours to stop bed sores and daily to have sheets changed or even more frequently when he soiled or wet the bed.

This was a WWII Veteran who survived Kokoda and numerous other battles, and in the end the country he fought for would not allow him to die with some dignity. He was not on any drip for liquids or food, so again it is a slow death by dehydration and starvation. The agony he felt every time they had to do his bed sheets or turn him was unbearable for me, so you can imagine what he was feeling.

In both instances the people were taking up beds resources etc when they could be more appropriately used by others.

I would be happy to appear before your enquiry or one of the members and give a more detailed account. Could you please advise if you will include my submission in your enquiry as it is a day late. I was trying to get someone to type this submission and my typist who was my wife is no longer with us.

A

copy of your findings and report when finished would be appreciated.

Yours faithfully,

Stan Malicki