

# PRESCRIBING AT THE END OF LIFE

## INTRODUCTION

Prescribing for patients in the last year, and especially in the last weeks of life presents a number of challenges to Primary Care teams:

- symptoms such as pain, agitation and breathlessness are very distressing for patients and their families, and can be difficult to control
- these situations may not arise very frequently for individual GPs and there are many medications in a variety of formulations, especially for pain management
- professionals can find it difficult to know how to change drugs when patients deteriorate, and how to stop “non-essential” medications
- clinicians report less confidence in controlling symptoms for non-cancer cases such as chronic obstructive pulmonary disease (COPD) and heart failure
- crises often seem to occur late in the afternoon and obtaining drugs quickly can be difficult.

This module will cover the following:

- the use of opioids for pain, with an emphasis on changing medications and formulations
- dyspnoea and respiratory secretions
- restlessness/agitation
- nausea/vomiting.
- anticipatory prescribing and Just in Case boxes
- discontinuing medications

There are a lot of appendices in this module that give detailed advice on medications so that the module can be used for reference when seeing patients. You may not want to print them all.

Facilitators please note that it would be useful to have a copy of the relevant conversion charts for Case 1 available at your PBSGL meeting.