

On Death X

The Hospice Option, and the quality of life support it provides.

Hospice is a wonderful movement or program that brings life to the dying person and to their surrounding family and friends. A Physician admits a patient to “hospice” when they have in the best medical estimate “less than 6 months” to live. Hospice implies concentrating on comfort care and pain management; it usually implies a less invasive form of medical treatment, so rather than needles Hospice uses pain medication patches or oral medication. Hospice also tries to see the patient “holistically” – that is as a person. Hospice teams include chaplains, social workers and nurses all guided by the Physician. Everyone works together to give “quality” to the dying person’s last days, weeks or months. “Quality” is a tricky concept; what I value may be very different from what you value, but Hospice takes the person’s values and desires into account. Hospice is an “in home” program; in other words it isn’t a place, but a way of helping the primary caregiver[s] – the family usually, to keep the person at home and to make sure the medical treatments are effective, safe and appropriate. We have been talking recently about establishing a “hospice house” in Brentwood which would be a place where hospice patients could come to stay in order to give respite for their caregivers for a week or so, and then also at the end of life. Even though the hospice team can make it possible for a person to remain at home until the end, often the actual care is beyond the family’s capability, even assisted by hospice professionals. There are few places where dying patients can be admitted which is “home like”. A hospital or convalescent hospital is a poor place for a Hospice patient; staff often does not understand Hospice directives and can “over treat.”

IHM Pray for us.

Fr. Jerry