



Terminally-ill patients often denied chance to die at home

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4 May 2007. Many terminally-ill patients cannot die at home because of a lack of services and training in palliative care, say researchers from the University of Warwick. Fewer and fewer people are dying at home and the most recent national statistics show only 22 per cent of cancer deaths occur there.

Jeremy Dale, Professor of Primary Care at Warwick Medical School, and Honorary Clinical Senior Lecturer Daniel Munday are co-authors of a discussion paper, which features in the May issue of the Journal of the Royal Society of Medicine. The article says the home death rate has continued to fall despite the rise in community palliative care services over the last 20 years in the UK. The authors highlighted a recent UK government White Paper, Building on the Best: Choice Responsiveness and Equity in the NHS, which proposed that all adult patients nearing the end of their lives should have the same access to high quality palliative care so they can choose to die at home.

However, Professor Dale explained for a choice to be meaningful, it had to involve at least two high-quality options. He said: "The health care professional may feel it particularly difficult to discuss preferred place of death with a patient when providing adequate community services or securing admission to a hospice is not possible. Preferred place of death may be a hollow concept and promise of choice a cruel sham if services are not available because of a lack of funding or other resources.

"Whilst simplistic rhetoric promising patients a planned death is seductive, the reality may be that the complex, uncontrollable nature of the dying process exposes real choice as being fool's gold."

Patients and families need to be empowered and there should be better training for health professionals working in palliative care. The authors are calling for more research funding to address the problems.

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