

Module 3: Workbook

Assessing and managing symptoms



Palliative care symptoms should be identified early and through impeccable assessment.^[1-3] Initial and ongoing assessment incorporates the person's physical, psychological, cultural, social and spiritual experiences and needs.^[2, 3] A management plan is developed, implemented and evaluated considering individual circumstances and goals of care. Evidence-based palliative care interventions are associated with improvements in quality of life and a reduction in symptom burden.^[4-7]

Overview

Module 3: Assessing and managing symptoms will help you develop the knowledge and skills required to identify the health needs of people affected by life-limiting illness. This resource will also help to develop an understanding of the principles for managing common symptoms in palliative care.

Aims and objectives

After completing this module, you should be able to:

- Explain the principles for assessing and managing common symptoms and health concerns associated with life-limiting illness
- Summarise evidence-based pain assessment and management strategies relevant to your profession.



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Section 1: Palliative care symptoms

Activity 1: Life-limiting illnesses

Thinking Points

1. How can understanding their likely illness trajectory help people to develop goals of care?

2. Choose one type of cancer (for example, lung cancer) and one non-malignant life-limiting illness (for example, chronic heart failure). Research the literature and answer the following questions:

- Identify current epidemiological data relating to incidence and survival rates
- Identify classifications, staging, grading and prognostic factors
- What health needs or concerns can arise throughout the course of the illness trajectory for these illnesses?

	Cancer	Non-malignant life-limiting illness
Epidemiological data		
Classifications / Prognostic factors		
Health needs		



Thinking Points *continued*

3. How can you use the evidence-based information on illness trajectories to:
 - Assist your clinical decision-making
 - Provide support to people with life-limiting illnesses and their families?

4. What limitations does illness trajectory information have in guiding clinical care?

Activity 2: Understanding symptoms in palliative care

Thinking Points

1. What were some of the common symptoms that Herbert reported that led to his diagnosis?

2. Review the current [guidelines on heart failure](#). Outline the symptom characteristics in each of the four classes of heart failure.

NYHA Functional Classification	Symptom Characteristics
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Class I	
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Class II	
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Class III	
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Class IV	
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Thinking Points *continued*

3. Describe what is meant by the term “multidimensional”? How are Herbert’s symptoms multidimensional?

4. Describe what is meant by the term “subjective”? In what way are Herbert’s symptoms subjective?

5. How have Herbert’s symptoms affected his quality of life – and his ability to function?

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Section 2: Principles of assessment

Activity 3: Principles of assessment

Thinking Points

1. Why is it important to complete a holistic assessment rather than focus on the physical dimensions of care alone?
2. List and describe the key principles for undertaking a multidimensional assessment of the symptoms for people with a life-limiting illness.
3. The palliative care physician in the expert opinion video provides key points on assessing symptoms for people with life-limiting illnesses. Compare the points made by the palliative care physician with those you have identified in Question 1.



Thinking Points *continued*

4. Review the current guidelines on heart failure. Describe the clinical history, assessment and investigations you would undertake to assess the causes and effects of breathlessness in people with chronic heart failure.

5. How are the aetiology and experiences of breathlessness similar or different for people with advanced lung cancer compared with chronic heart failure?

Activity 4: Assessment tools

Thinking Points

1. What can the Symptom Assessment Scale (SAS) and Palliative Care Problem Severity Score (PCPSS) tell us about Herbert's breathlessness?

- Comment on whether these tools assess the multiple dimensions of the symptom

- Comment on how these tools assess the individual's experience of the symptom

- What advantages and limitations would these assessment tools have in practice? Provide reasons for your answer.

2. What assessment tools can you use to assess a person's psychological wellbeing?

Activity 5: Symptom assessment

Thinking Points

1. What observations did you make from the video that indicate deterioration in Herbert's illness?
2. Consider Herbert's experience with his illness over the past six months:
 - In what ways is this consistent, or not, with evidence-based literature about heart failure progression
 - What factors have influenced Herbert's illness trajectory?
3. What are the common symptoms or clinical concerns that he may now be experiencing with class III heart failure?



Thinking Points *continued*

4. What are Herbert's psychosocial needs likely to be now that his illness is deteriorating?

5. Consider Herbert's illness and review the pathophysiology of two of the following:

- Fatigue
- Loss of appetite
- Breathlessness.

Within your answer outline how these symptoms are impacting on his quality of life.

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Section 3: Evidence-based symptom management

Activity 6: Principles of palliative symptom management

Thinking Points

1. In the first video, Herbert states: "I've got a lot of living to do." What does this statement indicate about his goals of care?
2. Describe what is involved in developing a comprehensive symptom management plan.
3. How can you ensure that the goals of care are included in the symptom management plan?



Thinking Points *continued*

4. Referencing CareSearch, investigate two symptoms of your choice using the following headings:

Symptom	Symptom
Underlying causes	
Effects on emotional, social and spiritual wellbeing	
Evidence supporting pharmacological interventions	
Evidence supporting non-pharmacological interventions	
Monitoring the effectiveness of interventions	

 **Thinking Points** *continued*

5. How can you ensure that the palliative interventions for these symptoms are:

- Holistic
- Integrated
- Targeted
- Tailored to the person?

Activity 7: Herbert's illness progresses

Thinking Points

1. What symptoms does Herbert describe?
 - What are some of the causes of these symptoms?
 - What are his treatment goals?

2. The palliative care physician recommends both pharmacological and non-pharmacological interventions for managing Herbert's breathlessness. Identify the supporting evidence and the likely mechanism of action for the following interventions:

Interventions	Supporting Evidence	Mechanism of Action
Opioids		
Relaxation		
Fans		
Activity pacing		
Oxygen therapy		



Thinking Points *continued*

3. Herbert expresses some concern about taking morphine for his breathlessness.

- Was the physician's response adequate? Provide reasons for your answer.

- What further suggestions do you have for addressing personal concerns about palliative treatments?

4. What other pharmacological agents should be considered to treat Herbert's breathlessness? Provide a rationale for your answer.

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Section 4: Applying symptom assessment and management – Pain

Activity 9: Assessing and managing pain in palliative care

Thinking Points

Watch the video and answer the following questions:

1. Complete the following pain assessment table for Bassam:

Characteristics of symptoms

How does Bassam describe his experience with pain?

How does Bassam differentiate between physical and psychological pain?

Contributing factors

What contributes to Bassam's pain?



Thinking Points *continued*

Behavioural responses

How is Bassam affected by his pain?

Meaning of symptoms

How would you assess the meaning of the symptoms to Bassam?

2. Bassam knows that he's dying and appears to draw comfort from being able to "live out his last days in peace". How can a person's perceptions and views about their circumstances influence how they experience and respond to symptoms?



Thinking Points *continued*

3. What sources of comfort does Bassam use to help relieve his pain?

4. How would you use a physical assessment to help understand Bassam's pain?

5. Why is the oral route the preferred method for analgesics?

 **Thinking Points** *continued*

6. What are the indications for the subcutaneous route?

7. Why is it important to consider using complementary therapies to address pain?

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Section 5: Reflections on what you have learnt



It is essential for all healthcare professionals to develop the capacity for reflection and self-evaluation of their professional and personal experiences, and to consider how this can impact on themselves and others.

Consider the module you have just completed and reflect on the following questions to assist with your ongoing development:

1. What key points have you learnt from the activities in this module that will help you in providing care for people with life-limiting illnesses and their families?

2. What specific strategies do you plan to incorporate as a graduate healthcare professional?

3. Do you see any difficulties using what you have learnt here as part of your practice as a healthcare professional? If so, what strategies would you use to address these difficulties?