## **Plenary Sessions**

P4.2 Palliative Care

16:15 Convention Hall B

## **Public Health Approaches to Palliative Care**

Currow DC

Flinders University, Australia

"Expected" deaths are an increasing part of healthcare needs. This has arisen in late 20<sup>th</sup> century and early 21<sup>st</sup> century as other causes of death have been so effectively dealt with. The way we die as a community continues to rapidly evolve and over the last century has seen transformations never imagined.

At a whole of population level, the number of expected death can be easily predicted and the needs of those patients and their families are far better understood than ever before. Further, the appreciation that good end-of-life care actually adds to the health of the community (particularly for caregivers who survive and move on with their life) means that this is a crucial part of healthcare policy.

Population-based approaches to this require health policy makers and clinicians to keep abreast of rapidly changing data. At a population level evidence exists that the needs of patient and their families can be quantified, that outcomes are associated with improved access to palliative care and that there are now data supporting causal benefit from palliative care over and above standard care.

The community and health services both can benefit from high quality end-of-life care. Understanding disease trajectories and developing policies that are not limited by prognosis nor by diagnosis but are based on the needs of patients and their caregivers forms the pivot around which to build excellent end-of-life care. Investing in this will help caregivers later in their own lives to continue to optimise their health.