

Palliative Care

THE 400-YEAR QUEST FOR A GOOD DEATH



Harold Y. Vanderpool

Palliative Care The 400 Year Quest For A Good Death

Michael Stolberg



Palliative Care The 400 Year Quest For A Good Death:

Palliative Care Harold Y. Vanderpool, 2015-07-11 The long history of medical care for the dying has largely been neglected It began in 1605 when physicians were challenged to enable persons to die peacefully Today it includes palliation of oppressive symptoms emotional and psychological care and respect for the wishes and cultural backgrounds of patients and families Especially since the 1990s it embraces symptom easing palliation for patients with severe life limiting and chronic illnesses Providing a detailed picture of contemporary palliative care this book chronicles four centuries of the quest for a good death covering the fight against futile end of life treatments the history of life extending treatments and technologies the roles of nurses the liberation of the dying from isolation in hospitals and hard won victories to secure patients right to choose

A History of Palliative Care, 1500-1970 Michael Stolberg, 2017-04-28 This book on the history of palliative care 1500 1970 traces the historical roots of modern palliative care in Europe to the rise of the hospice movement in the 1960s The author discusses largely forgotten premodern concepts like cura palliativa and euthanasia medica and describes how patients and physicians experienced and dealt with terminal illness He traces the origins of hospitals for incurable and dying patients and follows the long history of ethical debates on issues like truth telling and the intentional shortening of the dying patients lives and the controversies they sparked between physicians and patients An eye opener for anyone interested in the history of ethical decision making regarding terminal care of critically ill patients

The Medicalization of Birth and Death Lauren K. Hall, 2019-12-17 Improving how individuals give birth and die in the United States requires reforming the regulatory reimbursement and legal structures that centralize care in hospitals and prevent the growth of community based alternatives In 1900 most Americans gave birth and died at home with minimal medical intervention By contrast most Americans today begin and end their lives in hospitals The medicalization we now see is due in large part to federal and state policies that draw patients away from community based providers such as birth centers and hospice care and toward the most intensive and costliest kinds of care But the evidence suggests that birthing and dying people receive too much even harmful medical intervention In *The Medicalization of Birth and Death* political scientist Lauren K Hall describes how and why birth and death became medicalized events While hospitalization provides certain benefits she acknowledges it also creates harms limiting patient autonomy driving up costs and causing a cascade of interventions many with serious side effects Tracing the regulatory legal and financial policies that centralize care during birth and death Hall argues that medicalization reduces competition stifles innovation and prevents individuals from accessing the most appropriate care during their most vulnerable moments She also examines the profound implications of policy enforced medicalization on informed consent and shows how medicalization challenges the healthcare community's most foundational ethical commitments Drawing on interviews with medical and nonmedical healthcare providers as well as surveys of patients and their families Hall provides a broad overview of the costs benefits and origins of medicalized birth

and death The Medicalization of Birth and Death is required reading for academics patients providers policymakers and anyone else interested in how policy shapes healthcare options and limits patients and providers during life s most profound moments

Palliative Care Nursing: Principles and Evidence for Practice Catherine Walshe,Nancy Preston,Bridget Johnston,2018-05-18 What can nurses do to support those receiving palliative care How do you ensure clear communication and maintain patients and families preferences Palliative Care Nursing is essential reading for nursing students professional nurses and other health and social care professionals providing supportive and palliative care to those with advanced illness or who are towards the end of life This third edition of the acclaimed textbook has been extensively revised and examines important research studies key debates around care and strategies to advance palliative care nursing In four sections the book covers key elements of nursing practice towards the end of life Defining the palliative care patient Providing palliative nursing care Caring around the time of death Challenging issues in palliative care nursing Leading authors address contemporary issues and explore how to provide high quality person centred palliative care encouraging application to practice through exercises and case studies Chapters completely reworked or new for this edition include those on communication living with uncertainty bereavement care the costs of caring nurses decision making and capacity and palliative care worldwide The clarity of evidence presented and coverage of a diverse range of topics make this the foundational textbook for all studying palliative care at pre registration level postgraduate level or as part of CPD study With a foreword by last edition editor Professor Sheila Payne Lancaster University UK I welcome this third edition of Palliative Care Nursing and congratulations to the new team who have provided us with a dynamic and innovative development of a core text for palliative nursing practice As the largest workforce in palliative care and given the changing face of clinical practice for nurses including increased educational opportunity and expanding roles and responsibilities this book is timely in its focus on critical issues which frame and scope the reality of palliative care and the nursing contribution to that discipline The learning exercises in particular offer tools for educators and clinicians to reflect on practice and understand new ways of knowing in palliative care It will be an excellent resource for nursing both in the UK and Ireland and to the wider international audience having drawn on the breadth of global nursing expertise to bring this book together Philip Larkin Professor of Clinical Nursing Palliative Care University College Dublin and Our Lady s Hospice and Care Services Dublin Ireland President European Association for Palliative Care This is a book of substance that captures the current status of palliative nursing including the values and research evidence that underpin it The changing nature of palliative nursing as an evidence based specialism is balanced with practical skills and insights from experts and also considers the needs of those working with or concerned about the dying person s well being It covers a range of challenging issues as well as drawing on the wisdom of those who actually undertake this work on a daily basis I hope that students and practitioners from all disciplines will find this a useful resource to understand the art and craft of good palliative nursing Professor Daniel Kelly

Fellow of the Royal College of Nursing and Royal College of Nursing Chair of Nursing Research Cardiff University UK

Challenges to the Global Issue of End of Life Care Pierre Mallia, Nathan Emmerich, Bert Gordijn, Francesca

Pistoia, 2022-02-10 This book addresses the problems faced by people and hospitals dedicated to providing optimal end of life care and asks whether ethicists can function as experts on this subject Though ethics consultation is a growing practice in medical contexts difficult questions surrounding the role of ethicists in professional decision making remain The chapters in this book examine the nature and plausibility of moral expertise the relationship between character and expertise the nature and limits of moral authority the question of how one might become a moral expert and the trustworthiness of moral testimony This volume not only engages with the growing literature in the debate on end of life care but also offers new perspectives from both academics and practitioners Such perspectives include ways on how to get together to optimize end of life care This book is of particular interest to bioethicists clinicians ethics committees students of social epistemology patient groups and institutions especially religious who may not be sufficiently imparting the social teachings of end of life care It also shows how they are indeed stakeholders for what is today called a good death These new essays advance discussions and provide practical information on dying as well as acting as a guide to those interested in actively effecting change

Death and Dying Nicole Piemonte, Shawn Abreu, 2021-09-07 An examination of the contemporary medicalization of death and dying that calls us to acknowledge instead death's existential and emotional realities Death is a natural inevitable and deeply human process and yet Western medicine tends to view it as a medical failure In their zeal to prevent death physicians and hospitals often set patients and their families on a seemingly unstoppable trajectory toward medical interventions that may actually increase suffering at the end of life This volume in the MIT Press Essential Knowledge series examines the medicalization of death and dying and proposes a different approach one that acknowledges death's existential and emotional realities The authors one an academic who teaches and studies end of life care and the other a physician trained in hospice and palliative care offer an account of Western style death and dying that is informed by both research and personal experience They examine the medical profession's attitude toward death as a biological dysfunction that needs fixing describe the hospice movement as well as movements for palliative care and aid in dying and why they failed to influence mainstream medicine consider our reluctance to have end of life conversations and investigate the commodification of medicine and the business of dying To help patients die in accordance with their values they say those who care for the dying should focus less on delaying death by any means possible and more on being present with the dying on their journey

The Routledge Handbook of Religion, Medicine, and Health Dorothea Lüddeckens, Philipp Hetmanczyk, Pamela E. Klassen, Justin B. Stein, 2021-11-24 The relationships between religion spirituality health biomedical institutions complementary and alternative healing systems are widely discussed today While many of these debates revolve around the biomedical legitimacy of religious modes of healing the market for them continues to grow The Routledge Handbook of

Religion Medicine and Health is an outstanding reference source to the key topics problems and debates in this exciting subject and is the first collection of its kind Comprising over thirty five chapters by a team of international contributors the Handbook is divided into five parts Healing practices with religious roots and frames Religious actors in and around the medical field Organizing infrastructures of religion and medicine pluralism and competition Boundary making between religion and medicine Religion and epidemics Within these sections central issues debates and problems are examined including health and healing religiosity spirituality biomedicine medicalization complementary medicine medical therapy efficacy agency and the nexus of body mind and spirit The Routledge Handbook of Religion Medicine and Health is essential reading for students and researchers in religious studies The Handbook will also be very useful for those in related fields such as sociology anthropology and medicine

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Older Adults in Critical Care, An Issue of Critical Care Nursing Clinics of North America, E-Book Deborah Garbee,2023-10-16 In this issue of Critical Care Nursing Clinics guest editor Deborah Garbee brings her considerable expertise to the topic of Older Adults in Critical Care Top experts in the field provide readers with the latest on Delirium in Older Adults Sepsis Across the Continuum Progressive Supranuclear Palsy and more Contains 14 relevant practice oriented topics including Improving Outcomes in Cardiovascular Geriatric Patients Related to Polypharmacy Biofilm and Hospital Acquired Infections in Older Adults Implementation of Acute Care for Elders ACE and Nurses Improving Care for Healthsystem Elders NICHE in Critical Care and more Provides in depth clinical reviews on older adults in critical care offering actionable insights for critical care nurses Presents the latest information on this timely focused topic under the leadership of experienced editors in the field Authors synthesize and distill the latest research and practice guidelines to create clinically significant topic based reviews

Femina Problematis Solvendis—Problem solving Woman David H. Cropley,2020-05-06 This book explores the history of modern human creativity innovation highlighting examples of solutions to basic human needs that have been developed over time The title Femina Problematis Solvendis is a play on the scientific classifications of humans Homo habilis Homo erectus Homo sapiens but with special focus on inventions pioneered by women femina and is intended to suggest that a defining characteristic of modern humans is our fundamental ability to solve problems i e problem solving woman Femina problematis solvendis Written by

David H Cropley an internationally recognised expert on creativity and innovation it also builds on his previous book *Homo Problematis Solvendis Problem solving Man* published in 2019 The book explores innovations over ten distinct ages of human history beginning with prehistory and moving up to the present information age Each era is covered by a dedicated chapter that describes three key innovations that were either definitely invented by a woman or can be plausibly attributed to a female inventor The book s focus on female inventors also serves to highlight some of the ways women have been treated in societies over time

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