



## Palliative care in adult patients with heart failure



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### **ABSTRACT**

Heart failure (HF) is a chronic and progressive condition in which the heart is unable to pump blood effectively to meet the body's needs. The disease is one of the main causes of morbidity and mortality in the world. Given its debilitating nature and patients' compromised quality of life, palliative care plays an essential role in the management of heart failure. This article will cover the key aspects of palliative care for adults with heart failure, including definition, goals, interventions, and the importance of the multidisciplinary team.

**Keywords:** Palliative Care, Heart failure, Quality of life, Multidisciplinary team, Symptom management.

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## INTRODUCTION

Heart failure (HF) is a chronic and progressive condition in which the heart is unable to pump blood effectively to meet the body's needs. The disease is one of the main causes of morbidity and mortality in the world. Given its debilitating nature and patients' compromised quality of life, palliative care plays an essential role in the management of heart failure. This article will cover the key aspects of palliative care for adults with heart failure, including definition, goals, interventions, and the importance of the multidisciplinary team.

## OBJECTIVE

This article aims to analyze the importance of palliative care in improving the quality of life of adult patients diagnosed with heart failure, highlighting the necessary interventions, the fundamental role of the multidisciplinary team, and the approach that aims to alleviate symptoms and offer emotional, psychological, and spiritual support, contributing to effective and patient-centered management.

## METHODOLOGY

This study was developed through a qualitative approach, with emphasis on literature review and analysis of current practices in palliative care for patients with heart failure.

## DEVELOPMENT

Palliative care is defined as a specialized approach to the care of patients with serious, chronic, and life-threatening diseases. They focus on improving the quality of life of patients and their families, providing relief from suffering in all its forms, rather than focusing solely and exclusively on curing the disease.

This approach recognizes that for many serious and chronic conditions, complete healing may not be possible. Therefore, efforts are directed towards ensuring that patients live as comfortably and meaningfully as possible. Unlike curative care, which has the primary goal of treating or curing the disease, palliative care focuses on comfort and holistic support, regardless of the stage of the disease or the need for other treatments.

The World Health Organization (WHO) defines palliative care as "an approach that improves the quality of life of patients and their families facing problems associated with life-threatening illnesses, through the prevention and alleviation of suffering through the early identification, assessment, and impeccable treatment of pain and other physical, psychosocial, and spiritual problems."



## OBJECTIVES OF PALLIATIVE CARE IN PATIENTS WITH HEART FAILURE

Palliative care for patients with heart failure (HF) has the primary objective of improving quality of life, through an approach that focuses on the prevention and relief of suffering. This is achieved through a series of interventions that aim to treat the whole person, addressing physical, emotional, social, and spiritual aspects of the disease. Some more detailed examples can be cited:

### **For symptom relief**

- **Dyspnea Control:** Dyspnea, or difficulty breathing, is one of the most common and distressing symptoms of HF. Treatment may include the use of opioids, but in low doses. These opioids can help relieve the feeling of shortness of breath. Also diuretics, which reduce the accumulation of fluids in the lungs, facilitating breathing and Oxygen Therapy, which when appropriate, the use of oxygen can be beneficial.
- **Fatigue Management:** Extreme fatigue is another frequent complaint. Interventions include Medication Optimization, as by adjusting HF-targeted medications, this can reduce fatigue and improve cardiac efficiency. There is also Counseling on physical activity, where cardiac rehabilitation programs and light exercises are available that can help increase the endurance of the operated patient. And of course, the balance between activity and rest, where it is important to balance physical activity with rest periods to maintain balance and thus have a better and healthier recovery.
- **Pain Relief:** Chronic pain can occur due to various reasons, including ischemia or edema. Treatment in this case can be carried out with analgesics and may include opioids when necessary. There are also complementary therapies, such as acupuncture, massage and physical therapy.

### **For emotional and psychological support**

- Treatment of anxiety and depression, as HF patients often face high levels of anxiety and depression. Psychological support can include psychotherapy such as cognitive-behavioral therapies (CBT) and medications such as antidepressants and anxiolytics, but in this case they will be prescribed according to the needs of each patient, as they can help manage the emotional impact of the disease, promoting resilience and mental well-being.
- Continuous Emotional Support, which is provided by psychologists, social workers, and other members of the palliative care team, this ongoing support helps patients and their families cope with the emotional impact of illness.



## Improved Quality of Life

- Planning of meaningful activities, where the patient is encouraged to participate in activities that bring pleasure and meaning, adapted to their capabilities.
- Adaptation of the home environment, where it is recommended that adaptations be made to the home environment to facilitate the patient's mobility and independence.

## Communication and advance care planning

- Discussion of care goals, where there will be regular conversations about care goals, involving patients and their families, where this communication is crucial to align treatment with the patient's care, values, and desires.
- Advance Directives, where assistance is made in the creation of advance directives and the appointment of proxies for health care, ensuring that the patient's wishes are respected, even when he cannot express them.
- Decisions about invasive treatments, to help patients make decisions about whether to accept or refuse invasive treatments, such as cardiopulmonary resuscitation (CPR) and mechanical ventilation. It is important to ensure that patients and their families are well-informed about the progression of the disease and the treatment options available. These conversations also help to avoid unwanted and unnecessary medical interventions, focusing on care that really matters to the patient.

## Nutritional Support

- Regular nutritional assessment, to monitor the nutritional status of patients, thus avoiding malnutrition and cardiac cachexia.
- Dietary Guidance, providing dietary recommendations that help manage symptoms such as fluid retention while maintaining proper nutrition.

## Spiritual and Cultural Interventions

- Spiritual Support, which is offered by chaplains and spiritual counselors, where it helps patients find peace and meaning during the progression of the disease.
- Respect for patients' cultural and spiritual beliefs is essential to provide care that is truly centered on the patient's will, ensuring that care is culturally sensitive and respectful of their traditions and practices.

In summary, palliative care for patients with heart failure aims to provide a comprehensive, patient-centered approach that alleviates suffering and improves quality of life. Through a combination of symptom management, emotional support, advance planning, and nutritional and



spiritual interventions, palliative care provides robust and compassionate support that addresses the complex needs of HF patients.

## **IMPORTANCE OF THE MULTIDISCIPLINARY TEAM**

Effective management of heart failure in palliative care requires a multidisciplinary approach. The complexity of advanced heart failure (HF) requires a comprehensive approach that goes beyond conventional medical treatment. The multidisciplinary team plays a crucial role in providing palliative care, offering a diverse set of skills and knowledge that ensure a holistic and patient-centered approach. This team should include cardiologists, nurses, palliative care specialists, dietitians, psychologists, social workers, and chaplains. Each team member brings a unique perspective and specific skills that contribute to more comprehensive, patient-centered care.

This article explores the importance and benefits of the multidisciplinary team in the management of adult patients with heart failure in palliative care. Below we will describe who makes up the Multidisciplinary Team and what is the responsibility of each one, namely:

- Cardiologists, who are responsible for the specific management of heart failure, where they evaluate and adjust medical treatment, monitoring the progression of the disease and providing guidance on therapeutic interventions. Cardiologists work closely with other team members to balance disease management and patient quality of life.
- Specialized Nurses, who play a central role in daily symptom monitoring, medication administration, and educating patients and their families about disease management. These nurses are instrumental in identifying changes in the patient's clinical status and communicating these changes to other team members.
- Palliative care specialists, who are focused on alleviating distress, as these professionals have specific skills in managing complex symptoms, emotional support, and communicating effectively about care goals and advance planning. The knowledge and expertise of these professionals is essential to ensure that care is consistent with patients' values and desires.
- Psychologists and Psychiatrists, who address the emotional and psychological needs of patients and their families, helping to manage anxiety, depression, and other mental conditions associated with heart failure. They also offer therapies and interventions to improve emotional resilience and quality of life.
- Nutritionists assess the patient's nutritional status and provide personalized dietary guidance to help manage symptoms such as fluid retention and weight loss, thus ensuring that patients maintain an adequate nutritional status, essential for their overall strength and well-being.



- Social Workers, offering support with practical issues such as care coordination, access to community resources, and financial support. It also helps to facilitate communication between the health team and the family, ensuring that social and logistical needs are met.
- Chaplains and Spiritual Counselors, who carry out the approach to the spiritual needs of patients, helping to find meaning and comfort during the progression of the disease and also, offering religious and spiritual support, respecting the cultural beliefs and practices of the patients.

## **BENEFITS OF THE MULTIDISCIPLINARY TEAM APPROACH**

We can also describe the benefits of the Multidisciplinary Team approach and the influence that the work of each one brings to the life of the patient and their families. With this, we quote:

Holistic care, as a multidisciplinary team addresses not only the physical aspects of heart failure, but also the emotional, social, nutritional, and spiritual needs of patients. And this comprehensive approach improves quality of life and provides more complete and personalized support, covering and understanding the needs of patients, ensuring that every aspect of their life and health is taken into account.

Improved communication and care coordination, where collaboration between different health professionals promotes effective communication, avoiding duplication of efforts and ensuring that all aspects of care are considered. It also facilitates advance planning and decision-making, ensuring that care is aligned with the patient's wishes and values.

Effective symptom management, with the combined expertise of the team, it is possible to more effectively identify and treat complex symptoms of heart failure, such as pain, dyspnea, and fatigue. And that rapid and appropriate interventions are carried out can significantly improve patient comfort.

Emotional and psychosocial support, as the presence of psychologists, social workers and chaplains offers robust support to deal with the emotional impact of the disease, both for patients and their families. It also promotes resilience and helps to face the challenges of the disease with greater tranquility.

Advance Care Planning, where the multidisciplinary team is well placed to lead discussions about care objectives and patient preferences, helping to formulate advance directives and individualized care plans. This ensures that treatment decisions are made based on a clear understanding of the patient's wishes, avoiding unwanted interventions, and promoting patient-centered care.

Therefore, the multidisciplinary team is an essential component in palliative care for patients with heart failure. The diversity of knowledge and skills of its members allows for a comprehensive



and integrated approach that significantly improves the quality of life of patients. Effective collaboration between cardiologists, nurses, palliative care specialists, psychologists, dietitians, social workers, and spiritual counselors ensures that all patient needs are met in a holistic, compassionate, and patient-centered manner. A multidisciplinary approach is essential to provide the best possible quality of life for adult patients with heart failure and their families. Thus, early integration of palliative care can significantly improve the well-being and satisfaction of HF patients.

In addition to all the approach taken so far to the clinical aspects and symptom management of palliative care for patients with heart failure, it is extremely important that the approach to ethical, legal, cultural and economic issues is considerable. With that, we discuss some additional points, such as:

## EPIDEMIOLOGY AND IMPACT OF HEART FAILURE

- **Prevalence and Incidence:** Statistics on the prevalence and incidence of heart failure in different populations; Increased prevalence due to an aging population and improved survival rates of acute heart disease.
- **Economic Impact:** Costs associated with HF treatment, including frequent hospitalizations; Economic benefits of palliative care, which can reduce hospitalizations and unnecessary interventions.

## ASSESSMENT AND IDENTIFICATION OF PATIENTS FOR PALLIATIVE CARE

- **Inclusion Criteria:** Tools and criteria to identify HF patients who would benefit from palliative care, such as the NYHA (New York Heart Association) tool and reduced ejection fraction.
- **Intervention Moments:** Importance of introducing palliative care early in the course of the disease, not just at the end of life; Periodic evaluations to adjust the care plan as the disease progresses.

## Palliative Care Models

- **Integrated Palliative Care:** Models of integration of palliative care in traditional CI care; Examples of successful palliative care programs and case studies.
- **Home Care:** Benefits and challenges of palliative care at home; Role of family caregivers and necessary support for them.



## ETHICAL AND LEGAL ASPECTS

- **Decision Making:** Discussions about shared decision-making between patients, families, and health professionals; Advance directives and the importance of legal documents such as living wills and proxies for health care.
- **Patient Autonomy:** Respect for patient autonomy and the importance of including patients in decisions about their own care; Ethical challenges related to end-of-life and the use of life-sustaining technologies.

## EDUCATION AND TRAINING

- **Training of Health Professionals:** Need for specific training for health professionals in palliative care; Educational programs and certifications in palliative care.
- **Education for Patients and Families:** Importance of educating patients and families about the nature of HF and the role of palliative care; Available educational resources and effective communication strategies.

## TECHNOLOGY SUPPORT

- **Technology and Monitoring:** Use of telemedicine technologies and remote monitoring devices to support palliative care; Benefits and limitations of these technologies in improving the quality of life of HF patients.
- **Documentation and Communication:** Electronic documentation systems that facilitate communication between the multidisciplinary team; Digital tools for advance care planning.

## RESEARCH AND EVIDENCE

- **Clinical Studies:** Review of the literature and results of clinical studies on the efficacy of palliative care in HF; Gaps in current research and areas of future need.
- **Outcome Measurement:** Quality indicators to measure the impact of palliative care on HF patients; Tools for assessing quality of life and well-being.

## CULTURE AND RELIGION

- **Cultural Sensitivity:** Importance of considering cultural and religious diversity in the provision of palliative care; Specific cultural practices that can influence the acceptance and implementation of palliative care.
- **Intercultural Communication:** Strategies for effective communication with patients from different cultural backgrounds; Formation of culturally competent multidisciplinary teams.





## TESTIMONIES AND EXPERIENCES

- **Patient and Family Stories:** Inclusion of stories and testimonies from patients and their families about their experience with palliative care; Positive impact of palliative care in real life.
- **Experiences of Health Professionals:** Perspectives of doctors, nurses and other health professionals who work with palliative care; Challenges and rewards of working in palliative care.

## FINAL CONSIDERATIONS

Palliative care plays a key role in the management of adult patients with heart failure (HF), a chronic and progressive condition that significantly affects quality of life. The debilitating nature of HF and its multidimensional impact require a holistic and integrated approach centered on patient relief. In short, palliative care is a vital and indispensable component in the treatment of adult patients with heart failure.

Heart failure is a complex disease, which not only affects heart function, but also imposes a number of physical, emotional, social, and spiritual challenges. Patients often suffer from symptoms such as dyspnea, fatigue, pain, and edema, which can be debilitating and drastically decrease quality of life. In addition to physical symptoms, many patients face anxiety, depression, and feelings of helplessness, exacerbated by the progressive and incurable nature of the disease. HF can also create a significant burden for patients' families, who often become primary caregivers and face emotional and logistical stress.

In this context, palliative care emerges as an essential approach, offering comprehensive support that goes beyond conventional medical treatment. The essence of palliative care lies in providing a patient-centered approach, which aims to alleviate suffering in all its forms. This approach includes effective symptom management, emotional and psychological support, advance care planning, nutritional and spiritual interventions, and a dedicated multidisciplinary team, which we discuss in this article.



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