



POSITION STATEMENTS



Palliative care and critical care join hands for end-of-life care

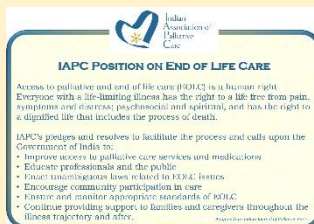
In a path-breaking partnership, the Indian Association of Palliative Care (IAPC) and the Indian Society of Critical Care Medicine (ISCCM) have joined hands with the objective of achieving excellence in end-of-life care. The integrated care plan, published in the Indian Journal of Critical Care Medicine, comes four years after a study of quality of death in 40 countries placed India at the bottom. [Read the integrated care plan.](#)

IAPC position statement on euthanasia

As a response to the Supreme Court's call for a debate on the subject, IAPC has published its position statement on euthanasia. Access to palliative care is still limited in India, as a result of which the suffering of most people is not addressed. The demand for euthanasia is a result of inadequate palliative care, and provision of comprehensive palliative care will significantly reduce the demand. Any request for euthanasia should be referred to palliative care experts for management. IAPC has opposed euthanasia in all its forms [in the position statement.](#)

The Indian Association of Palliative Care (IAPC) opposes euthanasia in all its forms. Good symptom control through palliative care can pre-empt the request for euthanasia. Withholding or withdrawing treatment that is medically futile does not amount to euthanasia.

FROM IJPC



End-of-life care policy: IAPC consensus position statement

Everyone with a life-limiting illness has the right to a life free from pain, symptoms and distress, psychological and spiritual, and has the right to a dignified life that includes the process of death. In its position statement, IAPC has described access to palliative and end-of-life care (EOLC) is a human right. [Read the full position paper.](#)

HAPPENINGS



CC meeting at Cipla Centre

For the first time after the secretariat shifted from Kozhikode, the IAPC Central Council met in Pune on September 5 and 6 for a structured discussion of several key issues. The meeting was hosted by Cipla Centre.



MUHS includes paediatric palliative care in Postgraduate Course

In a milestone decision the Maharashtra University of Health Sciences, Nashik has announced that palliative care will be added as a three-hour component to the Postgraduate Course for Paediatricians from the 2014 - 2015 academic year. [Read more.](#)

FROM EHOSPICE

Sanjeevani to usher in community-based palliative care movement in West Bengal

Over a 1000 trained volunteers have geared up to launch the first-ever community-based palliative care programme in east India, in Nadia district of West Bengal. Project Sanjeevani draws on the Kerala experience and has been envisioned by Dr P B Salim, District Magistrate, Nadia and Dr Suresh Kumar, Director, World Health Organisation Collaborating Centre, Institute of Palliative Medicine, Kerala. [Read more.](#)



ACADEMICS



June 2014 results of IAPC Essentials Course

IAPC congratulates all those who passed the June 2014 examination of the Certificate Course in Essentials of Palliative Care. [Have you checked if your registration number figures in the list?](#)

Applications invited for the November 2014 Certificate Course

Download the revised application form and brochure, and resources for the IAPC November course [here.](#)

CERTIFICATE COURSE IN
ESSENTIALS OF
PALLIATIVE CARE
2014

A Basic Course in Palliative Care
for Doctors and Nurses

FORTHCOMING EVENTS

IAPCON 2015
HYDERABAD, FEBRUARY 13-15

IAPCON 2015: "Influence, innovate, integrate: Pushing the boundaries"

More than 600 delegates are expected to attend the 22nd International Conference of the Indian Association of Palliative Care to be held at the Hyderabad International Convention Centre on February 13 to 15, 2015. Topics for the pre-conference workshop include morphine availability and implementation strategy, paediatric palliative care and leadership development in palliative care. The main conference will take up scope of palliative care in global health agenda, explore the integration of spirituality in clinical practice and education, review the learnings from other countries and assess the state of innovations in palliative care research. The parallel sessions will cover integration of care for HIV, new initiatives in palliative care teaching, complementary and alternative therapies, psychosocial research and practice and other subjects. The last date for submitting abstracts is October 30, 2014. For details, please visit the [conference website](#).

Free training programme for doctors and nurses on paediatric palliative care

IAPC's Children's Palliative Care (CPC) Project is organising a free four-week training programme on paediatric palliative care for doctors and nurses at Tata Memorial Centre, Mumbai. The three-day contact session from September 29 to October 1, 2014 will be followed by two weeks of home-based case studies and assignments. The last week will be devoted to hands-on training in palliative care at Tata Memorial Hospital and LTMG Hospital, Mumbai and at MGM Hospital, Kalamboli. The training will culminate in an examination. Write to [CPC](#) to know more.



Colloquium on Spiritual Care: Feb 10-11, Bengaluru

Dr Christina Puchalski, Professor of Medicine and Health Sciences at The George Washington University School of Medicine and the Founder of The George Washington Institute for Spirituality & Health, and Dr Amy Wachholtz, Assistant Professor of Psychiatry at the University of Massachusetts Medical School, and Health Psychologist on the Psychosomatic Medicine Consult Service at UMass Memorial Medical Center, will be among the experts who will be participating in the colloquium on February 10 and 11, 2015 to seek answers to questions on spiritual care as part of palliative care. For more information, contact the organiser, [Karunashraya](#).



JOURNAL SPOTLIGHT

SKIPP is a better measure of QoL

Dr Ravindra Ghooi

Quality of life (QoL) measures in use prescribe what constitutes QoL, rather than letting the patients decide what matters to them. However, as patients tend to have different priorities and issues, letting patients choose QoL parameters appears to be more logical. SKIPP has been developed just for that.

Commissioned by St. Christopher's Hospice and developed by the University of Southampton, SKIPP (St. Christopher's Index of Patient Priorities) is an outcome measure. It helps hospices and palliative care providers assess the impact of the care they deliver on patients and the changes in symptoms over time.

Professor Julia Addington Hall and her colleagues have described the development and validation of SKIPP in a paper in [BMJ Supportive & Palliative Care](#). The researchers have concluded SKIPP can detect patients' perception of change in QoL and their main concerns. As the tool has been designed with current and retrospective components, it addresses response shift and can be used with only one administration, which can be an advantage in frail populations.



You have received this as a member, associate or well-wisher of IAPC. Published by Vijayakumar Kotteri, National Information Officer, Indian Association of Palliative Care Secretariat, Cipla Palliative Care and Training Centre, Off Mumbai-Bangalore Highway, Warje, Pune 411058. For subscriptions and related queries, please write to ebulletin@palliativecare.in.