



## Now is the time to expand palliative care

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Dying can be a frightening prospect. Will I die hooked up to machines or unfettered and at peace?



It can also be expensive, a reality we should ponder since the number of Ontarians over 65 is expected to more than double within the next 25 years.

For both these reasons, it's urgent that provincial governments invest in more palliative care right now.

Our recently published [Ontario case study](#) delves into the details.

**Within 15 years, the oldest Baby Boomers will reach their 80s. Where they die will make a big difference in costs.**

Even in a hospital, not all beds are equal.

The most recent data from hospitals in Ontario shows that the cost of a patient dying in an intensive care unit is over \$8,000 more than the cost of dying in palliative care. Acute care costs \$10,000 more than palliative care.

**Yet, in recent years, over four times as many patients died in intensive care, and over ten times as many patients died in acute care than in palliative care.**

Unfortunately, palliative care is not available to all those who request it today.

How much could we save if we expanded access to palliative care?

### Cost savings of palliative care

Currently, only 6% of hospital deaths in Ontario occur in palliative care. Based on international research, as many as 36% of hospital patients could die in palliative care.

If 36% of dying patients had been cared for in palliative care instead of acute or intensive care in 2011, Ontario would have saved \$70 million.

If this number of Ontarians dying in palliative care remained constant, the province could save a whopping \$2.1 billion between now and 2036.

As impressive as this number is, the greatest reason to value palliative care is the patient experience.

### **A comfortable death? Priceless.**

Palliative care staff is highly trained in keeping a patient comfortable rather than fighting to keep them alive at all costs.

Palliative care teams discuss a care plan with a patient and their family, allowing them to choose whether or not they desire heroic interventions, endless tests and/or being kept alive artificially. For the patient who wants to avoid these things, the result is better end-of-life care. For the health care system, the result is lower expenses.

It should be noted that palliative care doctors have highly specialized expertise in pain management. The palliative care team focuses not on keeping patients alive as long as possible, but on making patients as comfortable as possible – emotionally, physically and spiritually.

Allowing peaceful surroundings with family also enriches care beyond what is possible for those who lay dying in acute or ICU wards.

### **Two reasons to expand palliative care**

There are, then, at least two reasons to expand palliative care in Ontario and in all provinces. First and foremost, it's better care at the end of life. Secondly, palliative care is less expensive than the alternatives, which are our current default.

Provincial governments are always looking for ways to save money. Looking at the aging of our population, the looming strain on our health care system is obvious.

For both the care of dying Canadians and care of the public purse, the sooner we invest in this, the better.

*This eReview is based on a study by Derek Miedema called Why Canada needs more palliative care, which can be downloaded for free [here](#)*

*Read an article by André Picard based on the study on [globeandmail.com](#) [here](#) (behind a paywall)*

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