

Terminal Treatment: an Analysis of Palliative Care in India

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ABSTRACT

The realm of palliative care is a relatively new specialty of care in Indian medical facilities, emerging only about 30 years ago. Major religious and cultural aspects within the region have shaped how Indian physicians, healthcare workers, and patients respond to the concept of palliative care. Through a detailed literature search and analysis, the limitations and benefits of the current palliative care system in India will be discussed with approaches to pain management, psychosocial wellbeing, and the connotations presented with end-of-life care. The inextricable ties with religious practices and cultural norms in Indian medicine have further emphasized ideas of natural death and suffering in current lives to avoid condemnation in the future. Based on the principles of karma and natural healing practice in India, it is possible that palliative care in India relies on familial support rather than medical intervention as found more commonly in Western practices.

INTRODUCTION

- Introduced about 30 years ago, the branch of palliative care in India is a fairly novel system of care in India (Bag et al., 2020).
- However, the current outreach of palliative care in India only tends to 1% of patients (Bag et al., 2020).
- Not only does the healthcare system fail to provide sufficient resource for a robust palliative care program in India, but the connotative implications of palliative care often clashes with sociocultural and religious beliefs in the country.
- Palliative care is a subspecialty of medicine that seeks to optimize the quality of care for patients with terminal or complex diseases.
- In general, the term "palliative" has a somewhat controversial objective of eluding suffering.
- In order to properly treat patients, the cultural and religious background are key for physicians to understand and implement.

METHODS AND DATA COLLECTION

This project utilized a targeted literature review of palliative care practices within India determine the current advantages and disadvantages in the system. Key topics that were studied include:

- Opioid accessibility
- Religious connotations
- Familial role in healthcare
- Collusion
- Holistic care
- Analgesic use

DISCUSSION

In Hinduism, the state of being prepared with a clear mind is important for rebirth. When an individual is experiencing a painful death, the pain is seen as expunging sins, so some individuals may reject medications and analgesics. Patients tend to avoid preservations of autonomy from being the leading basis of their medical decisions. Family members and physicians work together to come to a decision regarding care, which is contrasted with Western cultures that emphasize autonomy (Krishna, 2015). Certain rites are performed such as singing hymns and placing tulsi (*Ocimum tenuiflorum*) on the patient's mouth to ensure a "good death". Palliative care needs to consider cultural rites (Firth, 2005). In the realm of palliative care, open communication is necessary to ensure timely institution of treatment and recommendations to the patient (Low et al., 2009). Current progress involves developing palliative care teaching centers, cultural awareness education to physicians, and government support to increase opioid availability (Khosla et al., 2012)

RESULTS

Palliative Care Aspect	Cultural Connotation	Hinduism Connotation
Painkillers	- Physicians in India have a limited knowledge of opioid pain medications. 90% of 326 medical students thought that the prescription of morphine in palliative care would lead to drug addiction (Jacob & Mathew, 2017). - 3% of India's cancer patients have access to opioid pain relief (Sharma et al., 2013)	- Narcotics may be perceived as obstacles to a clear mind upon dying and transition to afterlife or rebirth. - Pain is perceived as sin leaving the body; therefore, painkillers are viewed as unnatural (Firth, 2005).
Collusion	- Relatives may avoid disclosure to prevent depression or loss of hope in the patient (Low et al, 2009) - Medical decisions are taken by family members and physicians, not just the patient. This increases the possibility for collusion to occur (Aslam et al., 2005)	- In Hinduism, being prepared for death is important. Therefore, individuals should be aware and involved when making decisions regarding their health (Firth, 2005).
Holistic Care	- <i>Pathya Ahara</i> (disease-specific diet) mentioned in Ayurveda is nutritive as well as disease modifying. - A patient who gets good sleep feels lightness in his body. It is important to include these Ayurvedic aspects to ensure sound sleep: massage, bath, comfortable bed, intake of soup (Kulkarni & Divekar, 2020).	- Spiritual, social, physical, and emotional well-being are important to consider when delivering care. - Hinduism is not the only religion practiced in India and even within Hinduism there is a diversity in beliefs. It is important for physicians to avoid assumptions regarding how the patient and family wants care. (Khosla et al., 2012).

CONCLUSION

While painkillers can relieve pain at the end of life, the Hindu religion does not encourage them and believes pain is part of the life stages. Additionally, Indian doctors are not properly trained on the benefits of painkillers and are unlikely to prescribe to terminally ill patients because they believe that it may cause addiction. Collusion is sometimes common in India due to not wanting to alarm the patient. Sometimes, to protect the patient, the family may also feel like they can make the decisions regarding their healthcare. In Hinduism, it is seen as important that the patient is aware of their treatment options. The holistic treatment of the body is seen as important in both Hinduism and in the realms of Ayurveda medicine.

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