



Comfort Care

Palliative care and hospice care help patients, families enjoy time together



To ease his grandchildren's fears when he lost his hair during chemotherapy, Jim Steinriede encouraged them to paint his head. Jimmy and Peyton delighted in the job.

A kaleidoscope of images stream forth as Lynn Steinriede recalls her late husband's life: Jim losing his hair during chemotherapy treatment and letting their three grandchildren paint his head so they wouldn't be afraid. Jim eager to go outside in the morning to tend the vegetable garden they had grown from seed. Jim taking long walks with his dog, Ben, throughout the three-and-a-half years Jim lived with colon and esophageal cancers.

"He was funny and loved to tell long, long stories. I wish you could have met him," Lynn says with a wistful smile. "You would not have guessed he had cancer." The Steinriedes were no strangers to cancer. Their daughter, Sherry, the oldest of three children, is a leukemia survivor, diagnosed seven years ago at the age of 26. "Jim said Sherry set the bar for him. She was remarkable."

A year ago, the family held a remission and retirement party, inviting friends and relatives to celebrate Sherry's recovery and Jim's retirement at age 56 as a pressman for the *Cincinnati Enquirer*. Jim continued cancer treatments throughout the summer and fall of 2010 while nourishing his soul with landscaping and gardening. In October, a pain in his chest led him to Good Samaritan Hospital where doctors found bloody fluid around his lungs.

The next day, Ranga Brahmamdam MD, trusted medical oncologist for Jim and previously for Sherry, recommended that Jim consult with Good Samaritan Hospital's Palliative Care Team and then enter hospice care.

"I didn't even know what palliative care was," Lynn remarks. "Then, Dr. [Amanda] Holbrook, an internist, came in to talk to us. She was wonderful, compassionate, caring. She sat down with us and made us feel like Jim was her only patient. She answered every question, not in a hurry to go anywhere."

Palliative care is a relatively new medical specialty focused on improving the overall quality of life for patients and families facing serious illness. Medical Director Manish Srivastava MD, summarizes the role of his Palliative Care Team. "We do two things: 1) focus on pain and symptom management, including nausea, vomiting, shortness of breath, appetite loss and fatigue, and 2) help families define their goals of care and then decide what treatments will help them reach their goals."

Top left: This spring, Lynn Steinriede will get help from granddaughter Peyton in planting a memorial garden for her late husband, Jim.

The approach to palliative care is similar to that of hospice care. Both focus on improving the quality of life and creating goals for the time remaining. Both are heavily focused on symptom management. However, palliative care has a broader base since it can be introduced at any point in the person's disease process, whereas hospice care is limited to the last six months of life.

Some patients receive symptom relief from palliative care while also getting curative treatment. For example, an acute leukemia patient may be receiving chemotherapy while "we aggressively manage symptoms," Dr. Srivastava explains. Palliative care, which Good Samaritan offers to inpatients, also may help provide a smooth transition to hospice care.

Once the Steinriedes discussed their options with Dr. Holbrook and the Palliative Care Team, they decided that Hospice of Cincinnati would be the best option for honoring their goals. "We wanted to keep Jim at home," Lynn says. "The only way we could have done that was with Hospice [of Cincinnati]." A nurse met with them in the hospital to arrange Jim's discharge home. Soon after, a social worker and two nurses from Hospice of Cincinnati came to their house. "After meeting them one time, I could feel a connection," Lynn recalls.

The Hospice of Cincinnati staff explained that following an initial visit, a nurse would come weekly, and more often if needed, to evaluate Jim and monitor his medications and control his pain. "We specialize in symptom management and comfort care," says Tracy Zazycki RN, BSN, who has worked both as a home care hospice nurse and currently in the Hospice of Cincinnati Blue Ash Inpatient Care Center.

"Hospice is a philosophy of care that offers spiritual, physical and emotional support at the end of life. We listen to the patient and family about what they want and what might improve their quality of life."

Jim's final day came just weeks after his return home from the hospital. Lynn remembers he felt well enough to take a walk around his yard with his grandson that November day. Later that evening, Jim was chilled and his breathing was sporadic. Lynn called her three children to come and be with him. "I called Hospice of Cincinnati, and they sent a nurse over to help us. The kids were there. The dog was there. The nurse made sure Jim was comfortable and restful." Jim died shortly afterwards – at home, with his family surrounding him – just as he wanted.

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While Jim's need for hospice care developed suddenly, Hospice of Cincinnati provides care for six months or longer when a patient is in a slow decline and the progression of the disease, given its natural course, is expected to be terminal within six months. "The goal is to personalize care to each patient and family's needs so they can enjoy their remaining time together," Zazycki explains.

Lynn looks back six months later with praise for the many people who helped her family and the many prayers said. What would have been her 35th wedding anniversary recently passed, and she had dinner with her daughter and granddaughter and looked at her wedding photos. "We were happy. It was a good story – it just ended too soon."



Photograph by Tim O'Brien

Getting family input about their loved one's options and goals of care is at the heart of the work of Palliative Care Medical Director Manish Srivastava MD and Nurse Clinician Sandi Webb RN.



Understanding Palliative and Hospice Care

Palliative care is a medical specialty focused on improving the overall quality of life for patients and families facing serious illness. At Good Samaritan Hospital, it is provided to inpatients at any stage of chronic illness, even when the patient is receiving curative treatment. Emphasis is placed on symptom management, communication with the patient and family, and defining what quality of life means for them.

Palliative Care Medical Director Manish Srivastava MD explains that he and a palliative care nurse typically schedule a family conference and talk with a patient and family at length about their goals of care and their options. For Dr. Srivastava, "Communication is the main tool, like cardiologists have cardiac cath and gastroenterologists have endoscopies and colonoscopies."

If a person is considered to have less than six months of life remaining, the Palliative Care Team often refers patients to Hospice of Cincinnati, which provides comfort care as well as pain and symptom management for people in their homes, in long-term care facilities or in four inpatient care centers throughout Greater Cincinnati.

Both palliative care and Hospice of Cincinnati services are covered by Medicare, Medicaid and private insurance.

For information about palliative care, call **513-862-2864**. For information on Hospice of Cincinnati, call **513-891-7700**. To assist patients and families with end-of-life conversations, Hospice of Cincinnati is offering the free guide "Conversations That Light the Way." Call Patti Gaines at **513-792-7961** or e-mail Patricia_Gaines@TriHealth.com.