

## Improving palliative care for people who use alcohol and other drugs

### Authors:

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**Background:** People who use alcohol and other drugs are living longer, but with complex health challenges and care needs. This community face barriers to accessing palliative care when faced with difficult or terminal symptoms of illness. Clinicians often struggle to manage distress among people who use alcohol or other drugs at the end of their lives. There is little evidence to inform best practice clinical care in this context.

### Description of Model of Care/Intervention:

This workshop draws on clinical and lived experience to promote person-centered palliative care for people who use alcohol and other drugs. Participants will consider –

- Pathways for people who use alcohol and other drugs to participate in shaping their palliative care journey,
- Incorporation of substance use histories into clinical assessment,
- Identification and management of the patient's goals with regards to their substance use towards the end of life
- Consideration of the best environment for a particular individual to receive palliative care
- Assessment of and response to risks related to palliative care for people who use alcohol
- Opportunities to incorporate lived-experience perspectives into models of care

**Conclusion and Next Steps:** Improving palliative care for people who use alcohol and other drugs requires clinicians to practice person-centered care, careful analysis of risks and their potential mitigation, and the integration of perspectives of people with lived experience of drug use into health service delivery.

**Implications for Practice or Policy:** Many people who use alcohol and other drugs are excluded from access to services and adequate health care over their life course. Clinicians can challenge stigma and strive to better support people who use alcohol and other drugs as they approach the end of life.

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