

Research Journal of Pharmaceutical, Biological and Chemical Sciences

Condition Of Palliative Medical Care The Voronezh Region: Problems And The Ways Of Their Solutions.

Zolotykh TM*, Goncharov A Yu, Petrova TN, Hanina EA, Sadova LI, and Sadov NA.

N.N. Burdenko Voronezh State Medical University, 10 Studencheskaia Str., Voronezh, 394036, Russian Federation.

ABSTRACT

The article presents information on the state of palliative care in the territory of the Voronezh region. Particular attention is paid to the issues of its organization and the specific work of a specialist in the field of social and medical care for terminally ill patients. Based on the current problems of the service, promising directions for the development and improvement of the palliative care system are proposed.

Keywords: palliative care, incurable patients, system improvement

**Corresponding author*

INTRODUCTION

The global aging of the population, the growth of oncological morbidity, the changing structure of morbidity and mortality in the modern world led to the emergence of a large group of incurable patients who need palliative care. According to statistical data, patients with the most common forms of chronic malignant tumors should be included in the contingent of patients with various nosological forms of chronic progressive diseases. At the same time, combating pain, resolving the psychological, social or spiritual problems of patients acquires paramount importance, and the goal of palliative care is to achieve, not in words, but in practice the highest possible quality of life of patients and their families in the emerging situation [1,5,6,8].

The problem of organizing medical care for patients in need of palliative care is one of the complex and unresolved problems of modern health care. The range of tasks of palliative medicine is very wide and varied. But all of them, in the final analysis, are aimed at solving the main complex task - the maximum possible quality assurance of life of incurable patients [2,4,6]. Qualitative palliative care is the only real medical, social, psychological and spiritual support for seriously ill people and their relatives at the present stage of the society's development [1,2,3,7].

A detailed analysis of the state of palliative care in the Voronezh region is necessary for a qualified assessment of the status of the problem under discussion.

MATERIALS AND METHODS

The data of the official state statistical reporting for 2002-2017 are estimated and accounting and reporting forms of the primary medical documentation of the Voronezh regional oncology dispensary, as well as the current regulatory and legal acts, performance indicators of medical organizations in the Voronezh region involved in the provision of palliative care according to the reporting documents.

RESULTS AND THEIR DISCUSSION

Specialized palliative care for the adult and children of the Voronezh region is provided on the basis of the program "Development of Health Care of the Voronezh Region" both in inpatient and outpatient settings.

Inpatient care is designed for 600 beds of nursing care, open on the basis of medical organizations in the Voronezh region, of which 520 are in the districts and 40 beds in the city of Voronezh. The provision of beds for the provision of palliative care for 100 thousand people in 2017.was: adult - 34.5 (including palliative care, no beds for nursing care - 3.65) and children's - 2.56 per 100 thousand people. In 2016, 9361 patients were treated on nursing beds, and 957 patients were treated on palliative beds (adults). The proportion of patients with malignant neoplasms is 88.5% (847 patients), of which 10% received narcotic drugs.

On an outpatient basis, palliative care is provided in the palliative care offices on the basis of six large medical organizations: HEU № 7, HEU № 7 "Liskinsky RB", BIZ at the "Pavlovskaya RB". In areas with a small population, palliative care is provided by district doctors, general practitioners and specialist doctors trained in palliative care. The availability of physicians with training in palliative care was 1.53 per 10,000. The target indicator of the federal program of state guarantees is 0.061.

In the Voronezh region, the outpatient brigade of palliative care is provided by the outpatient service of medical organizations that provide primary health care both in Voronezh and in the districts of the region [6]. In 2017, the children's exit patronage service began on the basis of the Vocational School "Voronezh Regional Children's Clinical Hospital No. 2".

It should be noted that the last weeks and days of an oncological patient, as a rule, are accompanied by severe physical suffering and a painful fear of death. In these cases, the need for adequate therapy of the pain syndrome and prevention of suicidal behavior of the patient, in addition to therapeutic measures that allow at least a short period to improve the patient's quality of life, is in the foreground. The appointment of narcotic and psychotropic medications to outpatients with severe pain syndrome in medical organizations of the Voronezh Region is conducted in accordance with the Procedures approved by the orders of the Ministry of Health of the Russian Federation. In order to ensure the timely release of narcotic and psychotropic

medications, the medical organizations of the Voronezh Region providing out-patient and polyclinic care were assigned to the most territorially approximate pharmacy organizations that have the appropriate license located in the city of Voronezh and in all districts of the region.

In addition, there is a hotline in the Voronezh region on anesthesia, as well as a "hotline" "Assistance in Crisis Situations", including anesthesia, at the Voronezh Regional Clinical Psychoneurological Dispensary. According to these phones, doctors can receive recommendations on analgesic therapy from specialists of the oncology dispensary, and citizens can report problems that arise when obtaining the necessary pain medication [4,5].

Thus, based on the experience of providing palliative care in the Voronezh region, it can be concluded that in the context of the limited resource base of health care, the issues of improving the quality of medical care for terminally ill patients are especially relevant in the face of increasing numbers of aging populations. Such patients need not only medical care, but also long-term care and supervision, which is impossible without training specialists and creating high-tech medical centers capable of implementing medical services to improve the quality of life of this category of patients [2,4,7].

The oncological service develops and introduces new methods of combating oncological diseases, uses modern approaches to the prevention and treatment of patients with malignant tumors. The principles of interaction of elements of the cancer care system are being improved, and optimal models of interaction of various medical institutions involved in the treatment and prevention of malignant neoplasms are being constructed.

At the same time, despite the effective functioning of the state system of specialized medical care for oncological patients, promising developments and achievements of oncological science are in some cases not widely used in clinical practice. The interdisciplinary nature and complexity of the carcinogenic situation determine the need for a systematic approach to solving this problem. The increased interest in this problem is due at present to scientific and technological progress, changing the structure and scale of the medical and pharmaceutical industry. To solve the main problems in the organization of palliative medicine, it is necessary to determine the staff standards of medical personnel for the palliative care system, to develop and approve patient management protocols, to revise the medical standards of patient management, including in the provision of nursing care. This requires significant efforts and new approaches in the field of palliative medicine. In the future, the palliative care system in oncology should be used to provide specialized care for patients with various nosological forms of chronic diseases at the terminal stage of their development, that is, in a situation where the possibilities of specialized treatment have already been exhausted and / or impossible to perform because of the severity of the overall somatic state of patients.

REFERENCES

- [1] Esaulenko I.E., Petrova T.N., Kolesnikova E.N., Sudakov O.V. Genetic and clinic-pathogenetic peculiarities of prediction of development and the effects of obesity at young persons /Research Journal of Pharmaceutical, Biological and Chemical Sciences, 2017. №8(3). P.1368-1374
- [2] Esaulenko I.E., Petrova T.N., Goncharov A.Y., Popov V.I., Chernov A.V. Main directions for improving the regional public health protection system/Research Journal of Pharmaceutical, Biological and Chemical Sciences, 2017. №8(8). P.468-476
- [3] Esaulenko I.E., Popov V.I., Petrova T.N. Personalized approach to early detection and prevention of overweight in people young /Journal of SportsScience and Health. 2016. №6 (1). C.13-17
- [4] Kolesnikova E.N., Petrova T.N., Krasnorutskaya O.N., Sudakov O.V., Alekseev N.Y. Polymorphic genetic markers of obesity and their associations with clinical and metabolic indicators/Research Journal of Pharmaceutical, Biological and Chemical Sciences, 2017. №8(6). P.726-729
- [5] Model of planning process management treatment and preventive care for students based on the calculation of the integral index of health/ I.E. Esaulenko, O.V. Sudakov, T.N. Petrova// System analysis and management in biomedical systems. Moscow, 2014 - Vol. 12, No. 1. - P.273-280
- [6] Petrova T.N., Popov V.I., Zuiikova A.A., Natarova A.A. Monitoring of health of students with modern computer technologies/Scientific and medical herald of the Central Chernozem region. 2014. No. 58. P. 146-152.



- [7] Petrova T.N., Kolesnikova E.N., Sudakov O.V., Popov V.I., Alekseev N.Y. Possibilities of a personified approach to diagnosis of obesity based on the developed genetic tests and determining the sensitivity to phenyltiokarbamide/Research Journal of Pharmaceutical, Biological and Chemical Sciences, 2017. №8(6). P.713-717