

Cordt Kassner

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**HOSPICE &
PALLIATIVE CARE
TODAY**

March 2nd, 2024

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Research News

Saturday Newsletters

Research literature is the focus of Saturday newsletters - enjoy!

Palliative medicine fellows' discussions, perceptions, and training regarding medical cannabis

Journal of Pain and Symptom Management, by Dylan R. Sherry MD, Rushad Patell MD, Harry J. Han MD, Laura E. Dodge ScD MPH, Ilana M. Braun MD, Mary K. Buss MD MPH; 2/27/24

Medical cannabis is increasingly considered for palliation of pain, nausea/vomiting, anorexia, and other symptoms. We aimed to determine whether training in hospice and palliative medicine (HPM) adequately prepares fellows to counsel patients about medical cannabis.

Hospice fraud: Predicting ability and intent

Illness, Crisis & Loss, by Laura M. Waters, Patricia Moyle Wright; 2/28/24

Hospice fraud is a growing concern around the world. Yet, little attention has been given to the study of hospice fraud in the extant literature.



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Accelerate Growth
Accelerate Learning

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Private equity's plot against older Americans

Journal of the American Geriatrics Society, by James Webster MD MS; 2/24/24

Over the past several decades more than 140 private equity investment firms have acquired entities in major components of healthcare in the United States... Private Equity firms have undertaken acquisitions of financially or administratively distressed hospitals, nursing homes, physician practices especially emergency care and medical specialties, hospices, home care

agencies, physical therapy and rehabilitation operations, ambulance services, and nursing registries... Of particular importance for older Americans, Private Equity firms currently own a significant percentage of U.S. nursing homes; estimates range from 5% to 11%, and a rapidly increasing percentage of hospice and home care agencies. All three are important sources of seniors' care. Why should we be concerned about these issues considering all of the other current challenges to the medical system?...

Oncologist perceptions of racial disparity, racial anxiety, and unconscious bias in clinical interactions, treatment, and outcomes

Journal of the National Comprehensive Cancer Network, by Alexandrina Balanean, Emily Bland, Ajeet Gajra, Yolaine Jeune-Smith, Andrew J Klink, Harlen Hays, Bruce A Feinberg; 2/24

Cancer spares no demographic or socioeconomic group; it is indeed the great equalizer. But its distribution is not equal; when structural discrimination concentrates poverty and race, zip code surpasses genetic code in predicting outcomes. Compared with White patients in the United States, Black patients are less likely to receive appropriate treatment and referral to clinical trials, genetic testing, or palliative care/hospice.

Case histories of significant advances: Cicely Saunders and the modern hospice movement

Harvard Business School, by Amar Bhide, Srikant Datar; 2/25/24

This Case history describes the role of Dame Cicely Saunders (1918- 2005) in shaping the modern hospice movement. It is narrated in the first person through the words of her brother, Christopher Saunders (1926-2024) as told to one of the authors of this paper.



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Close but not close enough: How distance caregiving is associated with hospice family caregiver hospice communication experiences

Health Communication, by Lauren T Starr, Karla Washington, Kyle Pitzer, Debra Parker Oliver, George Demiris; 3/24

Half of hospice family caregivers report having unmet information needs, which can contribute to poor pain and symptom management, emergency department use, and hospice disenrollment for care-recipients and to caregiver strain and stress. Effective communication between hospice teams and family caregivers is critical yet communication inadequacies persist. Despite the growing prevalence of distance caregiving, including in hospice care, and the relationship between caregiver proximity and communication effectiveness, little is known about how caregiver proximity is associated with caregiver perceptions of hospice communication.

Knowledge gaps in end-of-life family caregiving for persons living with dementia: A study of hospice clinician perspectives

American Journal of Hospice and Palliative Medicine, by Meghan McDarby, David Russell, Lori King, Elissa Kozlov, Elizabeth A Luth; 3/24

More than 35% of hospice care recipients 65 and older have a dementia diagnosis. Yet family care partners of persons living with dementia report feeling unprepared to address their hospice recipient's changing needs nearing end of life. Hospice clinicians may have unique insight into the knowledge needs of family care partners and strategies for end-of-life dementia caregiving.

“Dying with a smile, just knowing that somebody’s listened to me”: End-of-life care and medical assistance in dying in Canadian prisons

OMEGA - Journal of Death and Dying, by Jessica Shaw, Peter Driftmier; 3/24

Medical assistance in dying (MAiD) has been legal in Canada since 2016 and some incarcerated patients who are at the end of their lives are eligible for the procedure. Interviews with nine incarcerated men at a federal penitentiary in Canada provide insight into some of the ways that people who are navigating aging and end-of-life in prison think about MAiD.



Today's Encouragement

**There is only one cardinal rule: One must always listen to the patient.
~Oliver Sacks, MD, Neurologist and Author**



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