

commentary

FIRST CONGRESS ON PALLIATIVE CARE OF CROATIA, an initiative to incorporate palliative care into the regular health system

Zagreb, 5-7 October 2006

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We organised another public event – this time a congress, to draw the decision-makers' attention to the fact that, in response to the recommendations of the Ministerial Committee of the Council of Europe, hospice centres are being opened all over the world, many of which, at least partially, as components of the regular health system. They are being opened also in the neighbouring countries, Macedonia, Serbia, Bosnia-Herzegovina – states which are definitely struggling with greater problems than Croatia. A more direct motive for this congress was to mark the 7th of October, the World Day of Hospice and Palliative Care. We were able to print the written contributions to the Congress as well as the proceedings of the Fifth Symposium on hospice/palliative care of two years ago, as a volume entitled *Palliative Care in Croatia and the World* (ed. Anica Jušić). The reviewers have recommended it, not only as a document of our endeavours but also as a textbook on palliative care.

The Congress started with lectures by two representatives of our great model – Poland, Jacek Luczak and Piotr Krakowiak. They come from a country with over 300 hospice units of various types, providing care every year to over 100.000 persons in need of such care. In the year 2006, all palliative care/hospice services were separated from services providing chronic care and are now financed directly from health funds.



Jacek Luczak and Piotr Krakowiak discussing

Nataša Miličević from Belgrade, a clinical oncologist, former head of the Department of Oncology of the "Bežanijska Kosa" University Hospital and presently Director of the BELhospice, the first palliative care centre in Serbia, described some of their achievements. They do not have yet an inpatient ward, but they do have interdisciplinary teams with both consultative and executive functions, mainly at the levels of primary and hospital health care, still only as a civil organisation. They have also opened a School of Palliative Care. The Minister of Health deputised his chief of department to convene the European Conference on Palliative Care in Belgrade, which concluded by adopting the Belgrade Declaration: "Palliative care should be available to all who need it; it must not be open to rich countries alone, or only to rich people in poor countries."

Mirjana Adžić from Skopje reported that two hospices have been built in Skopje and Bitola since 1998 as specialised institutions for palliative care. They are the result of partnership between the English Sue Ryder Foundation, the Macedonian Ministry of Health and the Fare Programme.

An oral report on the achievements in Tuzla, Bosnia-Herzegovina, was later placed on the agenda of the Congress. Two years ago, a 500 m² palliative ward of the University Clinical Centre was opened there, to be joined by a day-care hospice last year. They are also planning to open a palliative care department for children in 2007. All of these facilities will be available on the basis of a regular hospital referral. The initiator of all this is the Director for research and training of the University Clinical Centre, former student at the Institute for Neuromuscular Diseases, Zagreb-Rebro, Osman Sinanović (until recently Health Minister of the Tuzla Canton).



At the concert: Prof. Luczak upholds the idea of the hospice with the slogan "The hospice is your friend" written in English on a T-shirt.

This was the central part of the programme of the Congress. The idea was to show successful examples of the feasibility of hospice projects in countries with similar conditions, thus to prod Croatia to shake off its inertia and to give up the fateful slogan: we know all that, and do all that. The point, however, is how we are doing this. And this is why we held a special session also under the title *Palliative care – an important improvement of quality of care in medicine?*

In the session on *Education in palliative care*, the focus was on undergraduate and graduate courses in palliative care, held in the English language in Zagreb and headed by David Oliver in cooperation with the University of Kent, England. These courses are, we believe, the begin of long-term training for a larger number of students.

A press conference was held on the first day of the congress, attended also by our guests from abroad. It was managed as the first event of repeated action to find donors for the hospice movement under the title "...and what about saying goodbye?" This campaign is headed by Jadranka Mustajbegović from the "Andrija Štampar" School of Public Health. We have, namely, made some provision for our entrance into the life but the leaving of it is basically not covered in Croatia. And yet, the *ars moriendi* could also contribute to progress in the *ars vivendi* (Piotr Krakowiak, in: *Palliative care in Croatia and in the world*, 2006).

A major social event was staged in the evening of the first day of the Congress, and dedicated to the celebration of the World Hospice and Palliative Care Day. It was a concert of the Cantus Ensemble in the Mimara Museum. The conductor was Berislav Šipuš, the artistic director of the ensemble. They played modern music to mark the celebration of a very modern movement, and I believe that it will remain in our memory as a refreshing event.

On the second day, the focus was on *How to find your way in "the jungle" of new analgesic drugs in the advanced stage of the disease – a redefinition of indications*, and resulting in the following conclusions: we should follow the choice and application of analgesics as recommended by the current president of the World Hospice and Palliative Care Organisation Kathleen Foley. She was also chairperson of the WHO commission which first proposed the *three-step analgesia* and is at present again the head of a number of algological programmes. We should be especially careful to follow the working recommendations of the European Palliative Care Organisation, instead of constantly "reinventing the wheel", all the more so, as its directives were formulated specifically for less rich nations.

The sessions *Working in an interdisciplinary team* and *Teamwork in the practice of the Regional Hospice Centre Zagreb, Croatia* introduced the new approach in medicine, which is currently endorsed worldwide, and on which we in Croatia have insisted from the outset.

The subject of the third day was the ever-topical stopping *of curative treatment and transition to palliative care. How to determine, in medical terms, the moment when exclusively palliative care is provided*. The speakers were a number of eminent experts in the field from Croatia and abroad. It was not expected that consensus would be reached on the matter, because this is possible only within a single profession. However, it is important to speak about the problem in order to avoid rash decisions and to prevent great injustices under the pressure of financial constraints.

The Congress ended with the *Zagreb Declaration*, which said:

The volunteers of the Regional Hospice Centre Zagreb, Hirčeva 1, have been working for six years on the improvement of the quality of life of the dying and their families. But this type of work cannot and should not be continued. Sporadic actions ennoble the environment from which they come but do not help to evolve a new specialisation. Instead of voluntary work we should insist on full-time professional practice. There is social interest in accomplishing this, and there should be matching political will to make it come true. We urge the Government to initiate the establishment of a network of hospice units all over Croatia with the centre in Zagreb. We also demand the establishment of an institution for palliative care, authorized to conclude contracts with the Croatian Health Insurance Institute. It should be headed by qualified specialists in palliative care, who will have sufficient time and possibilities to continue their professional development and research. This is the only way to evolve a new profession in Croatia – that of palliative medicine/care.

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