

PALLIATIVE CARE IN BRAZIL: CONTEMPORARY THEMES

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INTRODUCTION

This research was motivated to understand palliative care as part of the field of public health, and particularly in the field of oncology in order to deepen strategic issues inherent to this level of attention.

The relationship between pollinators (inclusive social policies) and dispersers (fragmented social policies) in areas of health (health institutions of high complexity) is understood as the possibility of establishing cooperative links between social care and health. At the same time, it presents the nuclei integrators: Communication, Bioethics, Communication and Information Technologies and Continuing Education, and finally to support public policies in this area.

METHODOLOGY

The investigative process is guided by the descriptive and analytical approach, which combines review bibliographic and documents with the exploratory study, aiming to understand the logical sociopolitical in the public policy proposals in Palliative Care and its strategies, as well as Know depth in the process, purposes and the results of the work of health professionals - emphasizing the her nuclei integrators.

The results of semi-structured interviews with professionals working in palliative care programs (public and private) present the nuclei integrators: Social, Communication, Bioethics, Communication and Information Technology and Continuing Education.



"Death and Life" by Gustav Klimt created in 1916

CONCLUSION

It was found that the development of the model of palliative care in Brazil is recent and not immune to the problems of a technical nature and ethics. To make a difference in this sphere of attention are necessary the elimination of prejudice in relation to human finitude and introduction of mechanisms for the promotion of adequate care. This implies that the national and regional plans establish feasible goals and prioritize to original actions whose goals are quality service and the interests of patients, their families and the like.

Thus, the results of this study allow us to make some concluding comments:

- ▲ The relationship between pollinators (inclusive social policies) and dispersers (fragmented social policies) in areas of health (health institutions of high complexity) considered the possibility of establishing cooperative links between social and health services where occurs primarily on their intersection, namely: access to all levels of complexity of services Palliative Care.
- ▲ Social policy must act in view of integration in the different services. The social welfare laws should promote the right to social assistance to people in conditions of social insecurity, emphasizing the work focused on family.
- ▲ A renewal of health practices in palliative care involves the establishment of adequate communication using contemporary language through electronic media, and especially in the face to face a watchful eye on the representations regarding the care and the dying of layers poor and the middle classes.
- △ Identifies the benefits arising from the employment of ICT in the field of palliative care, but its success is conditional on the realization of profound changes in the practices developed at the level of internal procedures at the outer level and the hospital organizations with regard to the relationship of chain from birth to finitude.
- ▲ It is understood the similarity and difference between the channels of communication of difficult news and possible between health staff and patients and / or families. The communication of bad news focuses on the dialogue around a prognosis that indicates the finitude as given reality. The communication possible: mediation necessary to avoid the imposition of the truth about the prognosis with no chance of cure for patients who are not prepared to hear him.
- ▲ It is suggested that the thematic focus be inserted interdisciplinary continuing education programs, considering the negative representations of human finitude complicate the relationship between professionals and their patients.
- ▲The discipline of palliative care has potential to be explored in the context of interactive tele-education, to bring benefits both to health care as the permanent education.
- ▲ It is imperative to identify funding opportunities for implementation of proposals aimed at disseminating knowledge in palliative care including large blocks, namely: the historical trajectory of national and international, legislation and technical regulations; ; rights of patients, the organization of events applied to palliative care, Social epidemiology, the organization of therapeutic and recreational spaces and general aspects of ICT in Palliative Care.





