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# **SCIENCE AND SOCIETY: MODERN TRENDS IN A CHANGING WORLD**



**PROCEEDINGS OF V INTERNATIONAL  
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# PALLIATIVE CARE FOR ONCOLOGICAL PATIENTS IN THE TERMINAL STAGE

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**Topicality.** Modern public opinion is such that, despite the achievements of the current level of medicine, the diagnosis of cancer (regardless of the stage of the disease) is perceived as a death sentence, which carries with it a quick end of life. However, this is not the case, because a malignant neoplasm detected in the early stages is treatable, and with regard to patients with neglected forms of cancer, even here, all is not lost and hopeless. There is a complex of palliative measures aimed at alleviating the suffering of the patient, preserving his human dignity, identifying his needs and maintaining the quality of life in its final period. On the other hand, the task of palliative care includes providing social and psychological support to the patient's family. With cancer, in the terminal stage, the patient becomes the cause of family dysfunction, because it causes a colossal moral shock for loved ones and relatives, and it also brings economic, social and psychological difficulties, which can lead to a decrease in the quality of life of the entire family. Relatives who sympathize with the patient are often in a state of helplessness, not knowing how to act in such situations, resorting to various options for solving the problem, but remain in a hopeless situation.

Relatives of the patient, often being in a state of deep moral disorder, take a heavy burden on their shoulders, not knowing how to properly care for the patient, where it is better for the patient to be: at home or under the supervision of doctors and nurses, what to do if the patient is suffering from pain? To solve these problems and

bring specialized palliative care closer to each patient can be created a multidisciplinary team that would have the opportunity to go to the home of a seriously ill cancer patient. Minimum team composition: 1 palliative care specialist, 1 oncologist, district doctor, 1 nurse, 1 psychologist, 1 social worker, 1 volunteer, 1 lawyer. If necessary, other narrow specialists can be included and a priest .

**Purpose:** to study the level of knowledge about palliative care among the population of Ukraine and to identify the urgent need for the creation of a multidisciplinary palliative care team.

**Research materials and methods** . To study the level of knowledge about palliative care among the population of Ukraine and identify the need for the creation of a multidisciplinary palliative care team, we worked out and analyzed foreign and domestic literary sources, WHO and MOH surveys related to this topic.

**The results.** When analyzing the data, the following results were obtained: more than half of the surveyed respondents know what palliative care is. Out of 200 respondents: 112 people chose the correct concept of palliative care; 34 people do not know what palliative care is; 24 people think that palliative care is the provision of free treatment abroad and 30 people think that it is an organization that provides free help to lonely people. After a short informative message about palliative care to the respondents, the participants moved on to the second stage of the questionnaire. At the second stage, almost everyone answered that there is a need to create a multidisciplinary palliative care team: 92% (184 people) answered "yes", 8% (16 people) answered "no".

Respondents who answered "yes, there is a need to create a multidisciplinary palliative care team" explained their opinion with the following arguments: a multidisciplinary palliative care team is a good support for patients and their relatives with financial difficulties were counted (95 people); a multidisciplinary team of palliative care will reduce the suicide rate among patients answered - 14 people; a multidisciplinary team of palliative care will increase the turnover of the population for medical care answered - 13 people; a multidisciplinary team of palliative care will help the development of new state programs and laws aimed at improving the quality

of life of terminally ill patients answered - 9 people; in multidisciplinary group of palliative care will help increase the legal literacy of the population in medicine - 24 people.

The following arguments were offered by respondents who answered "there is no need to create a multidisciplinary palliative care team": there is no need to create a multidisciplinary palliative care team because there is no funding for it - 10 people; 1 person answered that there is no need to create a multidisciplinary palliative care team because there are good available medical facilities in the city; 3 respondents answered that there is no need to create a multidisciplinary palliative care team, because there is a problem of lack of medical personnel and 2 respondents answered that there is no need to create a multidisciplinary team of palliative care, because there are more priority problems in medicine, on which it is more appropriate to spend the state's money.

**Conclusions.** After studying the results of the questionnaire, we can conclude that the population of Ukraine is still not familiar with the concept of palliative care, although it has been provided for a long time in European countries and successfully functions in hospices. Regarding the idea of creating a multidisciplinary palliative care team, there was 100% support from the respondents. The creation of a multidisciplinary team could significantly improve the quality of life of patients and their relatives.

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