APA Official Actions

Position Statement on Role of Psychiatrists in Palliative Care

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Issue:

Palliative care is a comprehensive, multidisciplinary approach to treating persons with serious illnesses. Its focus includes life-limiting and life-threatening conditions, many of which are frequently complicated by psychiatric disorders or symptoms. Palliative care emphasizes early identification, assessment, and treatment of pain and other physical symptoms. It also addresses social, cultural, ethical, legal, and spiritual considerations in patient care to prevent and relieve suffering and distress and enhance the quality of life. Palliative care physicians have expertise in managing distressing symptoms such as dyspnea, nausea, and constipation. Their training in advanced disease trajectories and communication skills prepares them to engage in productive ongoing dialogues about prognosis and treatment options with patients and their families.

They have expertise in the ongoing assessment of patients' goals of care to ensure that medical choices are consistent with patient preferences. They remain engaged with patients throughout the course of illness. The American Board of Psychiatry and Neurology is a founding board of the ACGME-approved Hospice and Palliative Care fellowship. Patients with serious mental illness, major neurocognitive disorders with behavioral disturbance, and other psychiatric comorbidities are best served when specialized psychiatric care is integrated into palliative care services.

APA Position:

Many patients receiving palliative care have or develop serious psychiatric comorbidities requiring expert psychiatric management, and psychiatrists are critical members of and consultants to palliative care teams. Training in palliative care is needed in psychiatry residency training programs to meet the needs of expanding numbers of psychiatric patients in palliative care.

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