

GENERAL SURGERY IN PALLIATIVE PATIENTS: CHALLENGES, ETHICS AND QUALITY OF LIFE

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Abstract: General surgery in palliative patients is a challenging and ethical area that demands a sensitive and multidisciplinary approach. Facing the complexity of patients in advanced stages of serious illness, surgeons need to carefully balance the potential benefits of surgical intervention with the risks and consider the patient's individual goals for palliative care. Comprehensive preoperative assessment, open communication, and collaboration among healthcare professionals are essential. Ethical issues, such as respecting patient autonomy, become prominent, requiring shared and sensitive decision-making. Furthermore, psychosocial support, early implementation of palliative care and the search for innovations in surgical practice are fundamental to promoting a compassionate, patient-centered approach, aiming to improve quality of life during the palliative phase.

Keywords: Palliative care. General surgery. Palliative patient.

INTRODUCTION

Surgical practice in palliative patients represents a complex and delicate area of medicine, where health professionals are challenged to balance the search for symptomatic relief with respect for the patient's quality of life and wishes¹. Palliative care focuses on providing comfort and support to individuals facing serious illnesses, often in advanced stages.²

At the intersection of general surgery and palliative care, unique challenges emerge that require a multidisciplinary approach, careful ethical consideration, and a commitment to promoting quality of life in the final period of the patient's journey.²

Palliative patients often present with a significant burden of symptoms, requiring thorough preoperative assessment and integrated management to optimize comfort during and after surgical procedures.³ The

decision to submit a palliative patient to a surgical intervention requires a careful ethical analysis, balancing the potential benefits with the associated risks and respecting the patient's individual preferences.¹ It is in this context that interdisciplinary communication becomes crucial, bringing together surgeons, palliative care specialists and mental health professionals to collaborate in formulating strategies that address the physical and emotional complexities inherent to these situations.⁴

In addition to ethical challenges, general surgery in palliative patients requires a sensitive and compassionate approach to ensure that the intervention contributes to improved quality of life, alleviating symptoms without compromising the patient's overall well-being.²

This theme will explore these intricate dynamics, highlighting the strategies adopted by healthcare professionals to promote ethical and patient-centered surgical practice, even in the most advanced stages of disease.

METHODOLOGY

This is an exploratory bibliographic review, organized through an integrative literature review. The collection of scientific data and the systematization of information come from scientific productions published from 2007 to 2020, in Portuguese and English, indexed in the Virtual Health Library (VHL), Scientific Electronic Library Online (SCIELO) and Google Scholar. The collection of information used in the development of the work was based on the proposed theme, as well as its objectives.

RESULTS AND DISCUSSION

The intersection between general surgery and palliative care introduces a number of complex challenges and intricate ethical questions that healthcare professionals face

when providing surgical interventions to patients in advanced stages of serious illness³. Palliative care, focused on quality of life and symptom relief, takes on a new dimension when surgery is considered an integral part of the care plan⁵. In this context, decision-making becomes a delicate process, requiring a thorough assessment of the patient's clinical status, a deep understanding of their goals and values, and an open and honest discussion about the potential benefits and risks of surgical intervention.⁴

Preoperative assessment in palliative patients requires a careful approach, considering not only the technical feasibility of the surgery, but also the impacts on the patient's quality of life and dignity¹. Surgeons face the challenge of balancing the search for an improvement in symptoms with recognizing the reality of the patient's condition. Polypharmacy, common in this context, requires a thorough review of medications, adjustments to minimize interactions and an understanding of how these substances can influence post-surgical recovery.⁵

The decision to proceed with surgical intervention in palliative patients raises a series of ethical questions, including the principle of non-harm and respect for patient autonomy. It is imperative that healthcare professionals are aware of the fragility of these patients and carefully consider whether the potential benefits of surgery outweigh the associated risks and, equally important, whether they are in line with the patient's wishes.³ Open and transparent communication between the medical team, the patient and their families plays a crucial role in this process, promoting shared and respectful decision-making¹.

The multidisciplinary approach emerges as a fundamental element in the surgical care of palliative patients. Collaboration between surgeons, palliative care specialists, psychologists and social workers is essential

to ensure a holistic assessment of the patient's needs, addressing physical, emotional and social aspects. Team meetings, in which diverse professionals share their perspectives and experiences, contribute to the formulation of more comprehensive strategies that are sensitive to the complexities involved¹.

Furthermore, palliative surgery highlights the importance of implementing strategies for managing symptoms and promoting quality of life during the perioperative period and beyond. Healthcare professionals must be prepared to offer specialized support for pain control, management of gastrointestinal symptoms and comprehensive patient care⁶. Implementing early palliative care, even before surgery, can contribute to minimizing suffering and improving the patient experience².

Psychosocial support emerges as a crucial need in general surgery for palliative patients. The emotional impact of illness and surgery is significant for the patient and their families, and the provision of psychological support and counseling services becomes essential. Working together with social workers can help coordinate the transition between surgery and palliative care, ensuring an effective and smooth continuity of care⁷.

The ethical challenges inherent to general surgery in palliative patients also require constant reflection and a commitment to medical ethics. Professional integrity requires that surgeons be aware of the limitations of medical science, the fundamental principles of autonomy and beneficence, and respect for patients' beliefs and values⁵. Difficult decisions involving procedures that can prolong life, but with an uncertain impact on the quality of that life, require special ethical care¹.

In addition to the challenges, it is crucial to explore the possibilities for innovation in general surgery for palliative patients. Continued research can provide insights

into new surgical techniques adapted to this population, aiming to minimize invasiveness and optimize outcomes.⁸ The search for innovations in pain management, less invasive methods and more efficient surgical protocols contributes to a more compassionate and patient-centered surgical practice⁴.

General surgery in palliative patients is an area where the principles of medicine, ethics and palliative care converge. The challenges presented are vast, but the search for the patient's quality of life, even in advanced stages of the disease, remains the primary objective. A sensitive, multidisciplinary and ethical approach is essential to navigating the complexities of this evolving field, ensuring patients receive the best possible care, aligned with their individual values and desires.⁷.

CONCLUSION

General surgery in palliative patients is a complex journey that requires meticulous consideration of physical, emotional, and ethical challenges. The intersection between the pursuit of quality of life and the delivery

of sensitive surgical care highlights the critical need for a multidisciplinary approach, in which surgeons, palliative care specialists, psychologists, and social workers work collaboratively to provide comprehensive, compassionate care. In this challenging scenario, medical ethics plays a central role, requiring constant reflection on the fundamental principles that guide clinical practice, with a tireless focus on respecting patient autonomy and promoting a meaningful quality of life.

When facing the delicacy inherent to surgery in palliative patients, it is imperative not only to recognize the obstacles, but also to continually seek innovations and advances that can improve surgical practice in this context. A commitment to developing less invasive techniques, more effective symptom management strategies, and evidence-based ethical approaches can shape a future in which general palliative surgery is marked by a delivery of care that honors dignity, respects individual choices, and promotes a final journey of life that advocates quality and comfort.

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