

# Do we need Europe in everyday palliative care?

**“ In the last 18 years, the development of the European Association for Palliative Care (EAPC) has paralleled my education, training and professional experience in palliative care, beginning with its foundation in 1988 in Milan, until recently when I had the privilege of being elected a member of the Board of Directors of this association.**

Palliative care was unknown in Italy in 1985 when I graduated in medicine; and the term was only beginning to be used internationally following Balfour Mount's definition in 1975. The hospice movement identified a more recognisable concept, but again only in some parts of Europe and the world. Under the guidance of Vittorio Ventafridda, the first EAPC president, at the National Cancer Institute of Milan, we were told to be pioneers, but our perspective, as young physicians and nurses, was more that of being ignorant and left alone in the care of our dying patients, in a field deserted by our national health services. The Italian Association of Palliative Care (SICP) was established in 1986, with only a few members. Our national programme for palliative care has seen the foundation of 80 hospices over the last few years and there are plans for 200 more.

In the 1980s, we were told to look across the water to read what Cicely Saunders, Robert Twycross, Balfour Mount, Mary Baines, Elisabeth Kübler-Ross and so many others had written, and to meet with other people in our country and abroad who were working within this field. EAPC congresses followed, where we could finally meet the people who we recognised as professional role models.

The EAPC has been growing and, besides the highly scientific and educational value of its conferences, I can see the need for strengthening its role of sharing experiences by reinforcing the bonds with the collective members but also with individual professionals working in palliative care. This will enable the EAPC to be an advocate for palliative care at European and international political levels, as proposed by our President Marilène Filbet.<sup>1</sup> This role, fuelled by the high quality of the professional experiences, research

potential and educational tools shared in the EAPC arena, has, in my opinion, the aim of promoting cultural change in individuals and of favouring personal growth.

Many young professionals working in Italy came to me to say how important it is for them to be in touch with the SICP, to have a national journal, and to come to the congresses.

Paradoxically, sharing experiences from different countries has the same powerful role of providing help in solving practical problems encountered everyday – first, by building up a professional identity and sense of belonging and, second, by highlighting professional role models and scientific respectability.

Finally, a few thoughts that I would like to offer to all readers.

1. Communication between the EAPC and national organisations or collective members should be optimised; the EAPC can encourage national associations to become more active, but the associations themselves need to provide feedback and be more active.
2. All individuals who participate in EAPC activities can contribute to the EAPC. They can find information on ongoing activities and they can suggest ideas for ongoing or new task forces on the website.
3. Caring for the dying can only lead to the conclusion that human suffering is a concept that breaks through cultural and historical differences. The EAPC, together with national associations, is the natural place for those working in palliative care who need professional and academic recognition.

I hope that more people can join and see the EAPC as a significant asset, and that the corporate role nowadays typical of associations is just a consequence of the affection that we share as members of the hospice movement and of the palliative care community, of which the EAPC is a powerful instrument.

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## Reference

1. Filbet M. Taking up the EAPC challenge. *EJPC* 2005; **12**(4): 139.

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