

### **PORTUGAL**



**Population:** 10,566,212

### **Current Directory:**

Printed version

Online version

None identified

X

### **Key Contact/National Association**

#### **Key contact:**

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#### **National Association (member of the EAPC):**

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### **Palliative Care Services**

### NK = not known

Number of Palliative Care Services						
	Inpatient Palliative Care Units	Hospices	Consultant Teams in Hospitals	Home Care Teams	Day Centres	Total
Adult/Children	3	1	1	3	1	9
Paediatric only	0	0	0	1	0	1
			Inpatient Palliative Care Units/ hospices	Chronic Hospitals /Nursing Homes	Total	
Number of beds allocated to adult palliative care inpatients			53	0	0	
				Adults	Children	Total
Number of Bereavement Support Teams			0	0	0	

### Comments/Sources

- There is little formal or organized palliative care for children. However, palliative care is provided for children at home by the Equipa de Odivelas home care team.
- Bereavement support is provided by the multidisciplinary team; there are no specific services for this purpose.

[Information provided by medical directors of the following teams: Hospital Units - IPO Porto, IPO Coimbra, Hospital Fundão; Hospice - Unidade da Misericórdia da Amadora;



Home Teams - Equipa de Odivelas, Misericórdia de Azeitão, IPO Porto; Hospital Teams - Hospital de S.João-Porto; Day centre - IPO Porto]

[EAPC Palliative Care Facts in Europe Ouestionnaire 2005]

Adult Palliative Care Population				
97%	of patients receiving palliative care have a cancer diagnosis			
3%	of patients receiving palliative care have other incurable conditions			
		Cancer	(n)	
Number of patients who die at home N		NK	NK	
Number of patients who die in a general hospital		NK	NK	
Number of patients who die in other healthcare institutions		NK	NK	

#### Comments/Sources

Percentage of patients with cancer/non-cancer diagnoses receiving palliative care is an
estimate only. Only the teams in Odivelas, Fundão and Azeitão provide palliative care
for non-cancer patients.

[Information provided by medical directors of the following teams: Hospital Units - IPO Porto, IPO Coimbra, Hospital Fundão; Hospice - Unidade da Misericórdia da Amadora; Home Teams - Equipa de Odivelas, Misericórdia de Azeitão, IPO Porto; Hospital Teams - Hospital de S.João-Porto; Day centre - IPO Porto]

[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Palliative Care Workforce Capacity				
	Full-time	Part-time	Total	
Physicians	6	14	20	
Nurses	36	23	59	
Social Workers	NK	NK	6	
Psychologists	NK	NK	7.5	
Physiotherapists	NK	NK	4	
Occupational Therapists	NK	NK	1	
Spiritual/Faith leaders	NK	NK	5	
Volunteers	NK	NK	27	

### Comments/Sources

• Number of volunteers is an estimate only. There is a national non-profit organization (AMARA) that prepares volunteers and provides support mainly in the Lisbon area.

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[EAPC Palliative Care Facts in Europe Questionnaire 2005]

Funding of palliative care services		
Total number of palliative care services funded by the government	7	
Total number of palliative care services funded privately or by NGO's		

### Comments/Sources

 Three palliative care services are supported by a combination of private and public funds.

[Information provided by medical directors of the following teams: Hospital Units - IPO Porto, IPO Coimbra, Hospital Fundão; Hospice - Unidade da Misericórdia da Amadora; Home Teams - Equipa de Odivelas, Misericórdia de Azeitão, IPO Porto; Hospital Teams - Hospital de S.João-Porto; Day centre - IPO Porto]

[EAPC Palliative Care Facts in Europe Questionnaire 2005]



Perceived use of main opioids in palliative care				
Order of frequency	Opioid	Estimated cost per month (€)		
First opioid	Morphine (slow release)	NK		
Second opioid	Fentanyl patch	NK		
Third opioid	Morphine (immediate release)	NK		
Comments/Sources				
[EAPC Palliative Care Facts in Europe Questionnaire 2005]				

### **Key issues and challenges**

- Lack of political will, namely in practical implementation of specific palliative care teams.
- Misunderstanding about the costs of palliative care.
- Lack of acknowledgement about the importance of palliative care.
- Many hospitals give expensive strong opioids free of charge to the patients.
- Aqueous morphine and methadone are needed.
- Pain network and palliative care networks are written in documents but not adequately implemented in the field.

### [EAPC Palliative Care Euro-Barometer 2005]

### Palliative care accreditation

- There is no specialist accreditation for palliative care professionals in Portugal at the present time. Some of the doctors that run the units have worked abroad and/or had specific training in palliative care.
- There is a palliative care Master's course in the Lisbon Faculty of Medicine

### [EAPC Palliative Care Facts in Europe Questionnaire 2005]

### Palliative care milestones

• There have not been any important policy changes affecting the development of hospice and palliative care in Portugal since 2000.

### [EAPC Palliative Care Euro-Barometer 2005]

### **Health policy**

- The 'Associação Nacional de Cuidados Paliativos' did not mark the publication of the Council of Europe (2003) report on palliative care (Recommendation 24 of the Committee of Ministers to member states on the organisation of palliative care).
- The 'Associação Nacional de Cuidados Paliativos' has not participated in any way in the Council of Europe discussions about euthanasia (the Marty Report).
- At the present time there are no initiatives in Portugal that are seeking the legalisation of euthanasia or assisted suicide.

### [EAPC Palliative Care Euro-Barometer 2005]

### References

Gonçalves, J., A. 2001. A Portuguese palliative care unit. *Support. Care Cancer*, vol. 9(1): 4-7.

Gonçalves, J., A. 2003. "The last 48 hours of life in a Portuguese palliative care unit:



does it differ from elsewhere?" *Journal of Palliative Medicine*, vol. 6(6): 895-900. Information correct as at: 7<sup>th</sup> August 2006





