

## Palliative Care in Portugal: Are we “Choosing Wisely”?

### Cuidados Paliativos em Portugal: Estamos a Escolher Criteriosamente?

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**Palavras-chave:** Atitude do Pessoal de Saúde; Cuidados Paliativos; Portugal

Dear Editor,

The ‘Choosing Wisely’ campaign, which originated in April 2012 as an initiative of the American Board of Internal Medicine, has garnered widespread adoption.<sup>1</sup> Over 80 specialty medical colleges and consumer groups have joined, advocating for a paradigm shift in medicine: moving from a foundation of trust and steering away from defensive practices.<sup>1</sup> By promoting informed decision-making, the campaign aims to improve patient care while reducing healthcare spending and potential harm from overuse of medical interventions.<sup>1</sup>

In Portugal, the campaign’s influence is evident through the adoption of 200 recommendations by the Portuguese Medical Association, known as “*Escolhas Criteriosas em Saúde*”.<sup>2</sup> Within the comprehensive document collating recommendations from 38 medical specialties, the term ‘palliative care’ (PALC) appears twice, underscoring its importance in healthcare decision-making. Might it be timely to revisit the initiative ‘Choosing Wisely’ in Portugal, and focus specifically on the role of PALC?

Under the initiative’s umbrella, support has been garnered from 30 Portuguese scientific societies and 36 patient associations and other entities,<sup>3</sup> which raised questions about their advocacy efforts and the impact achieved in promoting PALC. For example, the American College of Emergency Physicians, emphasized, as early as in 2013, the importance of early engagement with palliative and hospice care services, highlighting potential benefits for patients’ quality and quantity of life.<sup>4</sup>

A decade ago, during the 67<sup>th</sup> World Health Assembly, resolution 67.19 recognized the moral imperative of integrating PALC into healthcare systems.<sup>5</sup> In Portugal, this recognition materialized in Law No. 52/2012, known as the “Basic Law for Palliative Care”, stating citizens’ rights to access PALC and establishing the “National Palliative Care Network”, operating under the authority of the Ministry of Health.<sup>6</sup> Interestingly, the ‘Choosing Wisely’ initiative and Law No. 52/2012 of the Portuguese Republic were launched in the same year. Law No. 52/2012 includes provisions that resonate with the ethos of the ‘Choosing Wisely’ initiative, striving to prevent low-value care and asserting that therapeutic obstinacy amounts to clinical malpractice.

As the projected increase in terminally ill patients underscores the importance of prioritizing people-centered care,

the need for informed decision-making in end-of-life care becomes increasingly critical.<sup>7</sup> Ensuring access to quality palliative and end-of-life care is imperative, especially given the projected increase – from 6.3 million in 2017 to 9.7 million in 2050 – in the number of individuals who will require such services.<sup>7</sup>

There are several barriers to PALC in Portugal due to myths and knowledge gaps. This was reported in an online survey with 592 participants (152 healthcare professionals and 440 laypersons) who responded to an anonymous questionnaire focused on PALC goals and purposes.<sup>8</sup> Laypersons revealed several misconceptions: PALC is only for those dying (67.0%), provided only in hospitals (60.2%), and only for cancer patients (32.5%). Additionally, they thought accessing PALC required stopping other treatments (53.4%), and believed referring doctors were giving up on patients (39.3%). They also thought PALC was for those not requiring specialized care (33.2%), equated it with having “nothing left to do” (31.1%), believed it accelerated death (41.8%), and thought PALC professionals promoted euthanasia (26.1%). Healthcare professionals (doctors, nurses, physiotherapists, and occupational therapists) had their own misconceptions: they believed PALC is not for everyone regardless of age (55.9%), thought PALC is for patients with a life expectancy of fewer than six months (47.4%) or in the process of dying (25.0%), and believed it accelerates death (17.1%). Additionally, they believed pain in PALC is normal and inevitable (17.1%), and it is only treated with addictive drugs (55.9%).<sup>8</sup> Raising public awareness and educating both the community and healthcare professionals about PALC should occur alongside the establishment of new PALC services. Prioritizing education and awareness campaigns for PALC is essential for public health.<sup>9</sup>

In light of these aspects, it is pertinent to reassess the ‘Choosing Wisely Portugal’ initiative’s stance on PALC and evaluate its alignment with evolving healthcare needs and priorities.

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All authors approved the final version to be published.

#### COMPETING INTERESTS

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