

Thursday 11 March 2010

09:00-10:00

The Abe Guz Lecture – Deconstructing dyspnoea to improve everyday practice

Professor David Currow

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Breathlessness remains one of the most feared symptoms in clinical practice. The sense of overwhelming doom generated by severe breathlessness needs to be actively and effectively addressed.

Unlike most other symptoms, it continues to worsen as death approaches. It has a major impact on patients, their carers and their health professionals.

The burden of breathlessness across the community is significant and most clinical services other than palliative care fail to address the symptom while simultaneously addressing any potentially reversible causes. As such, other clinical services have a great deal to learn from hospice and palliative care services.

Breathlessness is a complex somato-psychic experience. As such, anything that can influence the generation, transmission, meaning or response to the stimuli that caused the perception of breathlessness can theoretically help to relieve breathlessness. Understanding the underlying pathophysiology is crucial in addressing breathlessness at the bedside.

Underlying causes for breathlessness include cardio-respiratory disease, neurological disease and cachexia. Understanding the burden of breathlessness in the palliative population, and in the population more broadly across the community is crucial for good palliative care.

Non pharmacological interventions are being rigorously evaluated in their ability to generate and maintain reduced breathlessness at rest or on minimal exertion. Pharmacological interventions (including oxygen) are being rigorously evaluated. There is level 1 evidence for the use of opioids in this setting.

Professor David Currow is currently the foundation Chief Executive Officer of Cancer Australia, the Australian government's national cancer control agency. He continues to hold the appointment of Professor of Palliative and Supportive Services at Flinders University, Adelaide, Australia.

David initially trained as a physician in internal medicine with sub-speciality training in palliative medicine. At the same time, he completed a Master of Public Health exploring changes in the reported incidence of cancer unknown primary in New South Wales over a 25 year time period. Former roles include foundation Director of the Nepean Cancer Care Centre, Sydney and Area Director of Palliative Services Wentworth Area Health Service, Sydney. Since 2000 he has had the Chair of Palliative and Supportive Services at Flinders University where there are more than 200 distance students studying at a post-graduate level around the world from a variety of discipline backgrounds. He has published widely in palliative care journals and the general medical literature. Among other projects, he is co-chief investigator on an anthology of evidence for palliative care practice and service delivery – www.caresearch.com.au Other research interests include the symptomatic management of dyspnoea, improving population based planning for people with life limiting illnesses and improving the evidence base around which clinical decisions are made in palliative care.

David holds grants from the National Health and Medical Research Council and the National Institutes of Health (USA). He continues on the Board of the International Association of Hospice and Palliative Care and has been on the American Society of Clinical Oncology (ASCO) taskforce on palliative care education. He is a former president of the Clinical Oncological Society of Australia and a former president of Palliative Care Australia, the peak body for palliative care in the country. He is a senior associate editor of the Journal of Palliative Medicine.