

Dr Harvey Max Chochinov's address – CMA August 2012

The following address was delivered by Dr Harvey Max Chochinov to the CMA's 145th Annual Meeting and General Council, on receipt of Canadian Medical Association Frederic Newton Gisborne Starr Award. The meeting was hosted by Northwest Territories Medical Association (NWTMA) in Yellowknife, NT, August 12-15, 2012.

Attention for an award, like life itself, is something that comes and quickly fades. While this moment in time may be fleeting, as a profession, our attention to palliative care and how people die must be sustained. Over a quarter million Canadians die each year and the quality of each of those deaths is far from certain. In ninety percent of instances, death is foreseeable; and yet, less than one third of patients receive comprehensive, quality palliative care. When death occurs in a northern or remote region of our country, the chances of quality care are even less; and for dying children or for the institutionalized elderly, the limitations on palliative care and expertise can be mind numbing.

Believe it or not, there are still instances in our country when dying patients are being told that they must watch the clock before being able to receive their next dose of pain medication; there are families whose final memories of their departed loved ones are tinged with far too much preventable suffering. There are healthcare providers who simply don't know what they don't know about end-of life care; and patients and families, who have no idea that better outcomes are even possible.

Being alive is akin to being in flight. From the moment we are born and have taken off, we are destined, one day, to return to earth. Medicine has focused its attention, so to speak, on seeing to it that we fly longer, perhaps faster and higher, and certainly with a minimum of turbulence. Can you imagine an airline pilot exiting the cockpit near the journey's end, to announce that he or she can no longer fly the plane? This would be unconscionable, given that we rightfully expect a safe and expertly managed landing. When we tell our patients 'there is nothing more we can do for them', we have exited the cockpit. We have forgotten that the nature of life, like the nature of flight, is that it must invariably end. We have forgotten that when cure is beyond reach, providing patients comfort and care is always within our grasp. I would like to be able to tell Canadians that they should expect more from end of life care; that they deserve more. I would like to tell them that we recognize their fear and we will be their guardians of a good death; that Canadian physicians are prepared to commit to providing them expert, compassionate palliative care, until life itself has come to a complete and final stop.