

# FACTSHEET

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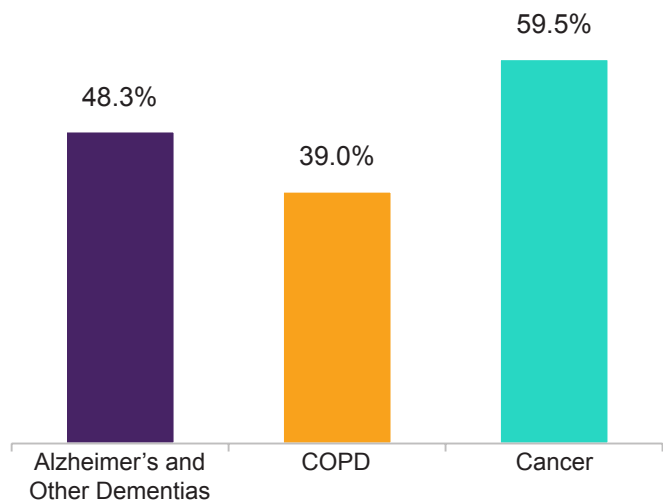
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## PCHETA and Alzheimer's Disease

**Palliative and hospice care—with a focus on managing and easing symptoms, reducing pain and stress, and increasing comfort—can improve both the quality of care and quality of life for those with advanced dementia.**

- Observational studies have shown that as many as half of nursing home residents with advanced dementia have documented pain in the last weeks of life—and about a third have difficulty breathing or swallowing, or suffer from agitation.
- Individuals with advanced dementia who are enrolled in hospice have a lower rate of dying in the hospital, a lower rate of hospitalization in the last 30 days of life, and better symptom management.
- A recent study shows that nursing home residents with dementia who receive palliative care at the end of life, compared with those who do not receive such care, are:
  - more than 3 times less likely to have a hospitalization in the last 30 days of life
  - 3.2 times less likely to have an emergency room visit in the last 30 days of life.
- Families of individuals with dementia who are enrolled in hospice have a greater satisfaction with patient care.

**Percentage of Seniors Receiving Hospice Care at Time of Death, by Condition**



**People with Alzheimer's and other dementias rely heavily on palliative and hospice care at the end of life.**

- Of all people living with dementia, 18.6 percent receive hospice care in a given year—a higher percentage than other chronic conditions. Among seniors in hospice care, nearly 1 in every 5 has a primary hospice diagnosis of Alzheimer's or other dementia.
- In the Veterans Administration health care system, 61.4 percent of dementia patients receive palliative care consultations in the last 90 days of life.
- Nearly half of all people with dementia die in hospice care.

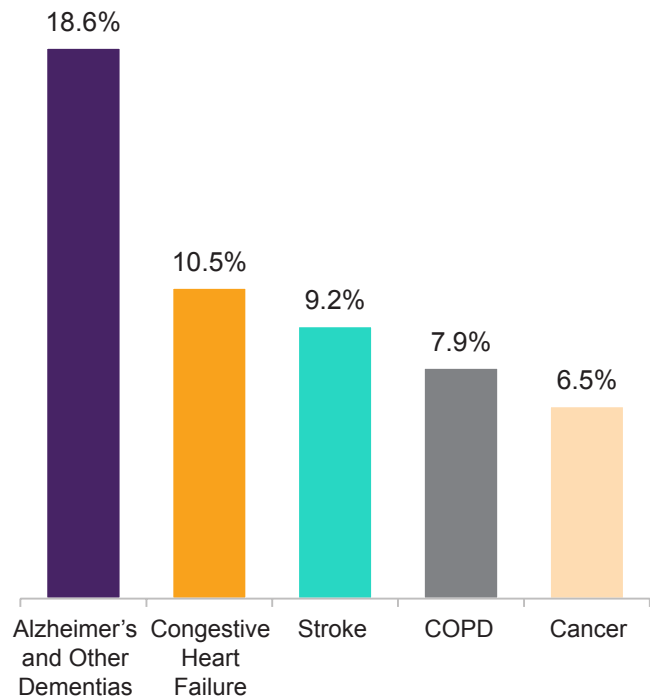
**The availability of palliative and hospice care is growing, but the need is growing faster—and the quality of the care remains a concern.**

- In 2000, less than one-quarter of U.S. hospitals had a palliative care program. By 2013, that had increased to three-quarters.
- Hospice care is now available in nearly three-quarters of surveyed nursing homes, but less than half of surveyed nursing homes report having some sort of palliative care program.
- Of those nursing homes with a palliative care program, only 42 percent include consultation by a physician certified in hospice/palliative care, and only 28 percent had a designated palliative care director.
- In the 2014-15 academic year, only 265 physicians were trained in hospice and palliative medicine by accredited programs. An expert Task Force concluded that 6,000 more full-time health care professionals are needed to serve current needs in hospice and palliative care programs.

**To increase the availability and quality of care, the Palliative Care and Hospice Education and Training Act (PCHETA) (S. 693 / H.R. 1676) would:**

- Establish palliative care and hospice workforce training programs for doctors, nurses, and other health professionals.
- Create a national education and awareness campaign to inform patients, families, and health professionals about the benefits of palliative care and available services and supports.
- Enhance research on improving the delivery of palliative care.

**Percentage of Seniors with Specified Condition Who Are Receiving Hospice Care, 2014**



**Hospice Users, by Primary Hospice Diagnosis, 2015**

