



Palliative and Hospice Care:

Comfort during a serious illness or the final months of life



When you learn that you have a serious illness, like cancer or congestive heart failure, you'll probably want to do everything you can to cure it. That's understandable, and can be successful.

But sometimes, treatment can be physically and emotionally difficult. That's where palliative care comes in. Palliative care can help you manage the pain and symptoms of your disease and treatment. It can also make you more comfortable and improve your quality of life.

Even with the best treatment though, you, your family and your doctor might decide at some point that aggressive treatment is not likely to help you live longer. That's when you might want to transition to hospice care. It can help keep you emotionally and physically comfortable toward the end of your life.

What is palliative care?

Palliative care focuses on relieving the pain and symptoms that can come with a serious illness. This can include fatigue, anxiety, depression, nausea and more. Palliative care is used most often in the last years of life but can help people going through any serious health problem. It can include physical, emotional and spiritual care and support. It is based on what you want and need, and can continue for as long as necessary.

What is hospice care?

Hospice care focuses on keeping you comfortable at the end of life. During hospice care, you are no longer treated to be cured but to have the best quality of life possible. This may include pain management, nursing care, counseling, and social work support. It may also include time when hospice staff takes over your care briefly so that your family and other caregivers can rest. Hospice care is for when a cure is not possible, especially if the side effects of treatment are uncomfortable.

Hospice care is always done in cooperation with your primary care doctor. You can get hospice care somewhere convenient to you – in your own home, a retirement community, a nursing home or sometimes in a hospital setting.

Is hospice care the same as giving up?

No. In fact, some studies of older adults with common forms of cancer who used hospice care lived almost a month longer than those who kept treating their disease to cure it. Also, hospice care might help you avoid going to the emergency room or hospital, or getting treatment you don't need. This is because hospice is meant to let you die quietly without heroic, lifesaving measures.



Planning Ahead

It is important to make your health care wishes known long before getting sick. Start by talking with your family. Also, prepare an “advance directive.” This form lets you say what you want if you can't speak for yourself. For example, you can put in writing that you don't want to be on life support if you cannot breathe on your own and aren't expected to recover. You can also make a legal document called a “medical power of attorney.” This lets a friend or family member make decisions for you if you're not able to speak or think for yourself.

- **Advance directive**
- **Medical power of attorney**
- **Your wishes and goals**

It's a good idea to talk about palliative and hospice care with your family when you discuss your advance directive and medical power of attorney. You should also have a conversation with your doctor about your wishes.

If you learn that you have a serious illness, talk to your doctor about palliative care. If you realize at any point that treatment will not help you, you can transition easily to hospice care.

Talk to your hospice provider about your end-of-life goals. Maybe you want to write letters to your friends and family or participate in a special event. People in hospice can accomplish a lot in their final months, which can bring a sense of peace and fulfillment.

This report is for you to use when talking with your health-care provider. It is not a substitute for medical advice and treatment. Use of this report is at your own risk.

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