Overall learning objectives:

- Review the Quebec healthcare system regarding palliative care services and resources.
- Define strategies to manage patients at the end of life with advanced lung diseases.
- Identify practical management strategies for common neuropalliative symptoms.
- Summarize strategies for the early detection, early prevention and medical treatment of delirium.
- Formulate approaches for psychological support to families with members experiencing delirium.
- Describe the indications for the use of cannabis at the end of life as well as directions for use based on current research.

7:45  Registration & Breakfast

8:20 – 8:30  Welcome & Orientation
Chair, Golda Tradounsky, MD, CCFP

8:30 – 9:00  Quebec Update: Palliative Care Resources and Services
Palliative Care Nurse Consultant, Marylene Hetu, N, MSc(A); Conseillère Cadre in Palliative Care, Marie-Laurence Fortin, MSc(N), CHPCN(C)

After attending this presentation, participants will be able to:

1. Understand the overall structure of palliative care delivery in the province of Quebec.
2. Understand the various types of palliative and end of life care which can be provided in hospital versus community palliative care residence versus CHSLD versus home, and the overlap which can exist.
3. Be aware of the training program which has been developed by the Ministry, and how it relates to their professional discipline; and how to access the training.
9:00 – 10:15  Palliative Care in Advanced Lung Diseases
Marc Baltzan, MDCM, FRCPC, FAASM
After attending this presentation, participants will be able to:
1. Describe the terminal trajectory of patients with advanced COPD and pulmonary fibrosis.
2. Compare with terminal cancer.
3. Integrate palliative care into advanced care planning.
4. Review the latest world guideline on palliative care in COPD.

10:15 – 10:30  Break

10:30 – 11:45  Neuropalliative Care: Practical Management of Common Symptoms
Jeffrey Hall, MD, MSc, FRCS (C); Justine Gauthier, M.Sc. (Nursing Education), RN
After attending this presentation, participants will be able to:
1. Identify pharmacological and non-pharmacological strategies to manage increased intracranial pressure.
2. Know what to do when a patient has persistent seizures and how to intervene with their family.
3. Identify less common seizure patterns.
4. Identify signs of distress in patients with decreased communication abilities (ex: aphasia, decreased level of consciousness, cognitive deficits).

11:45 – 12:30  Open Question and Answer Period
Panel of experts: Bernard Lapointe, MD; Marie-Laurence Fortin, MSc(N), CHPCN(C); Anne-Marie Charbonneau, B. Pharm, MSc; Christopher MacKinnon, PhD.
- Registrants are encouraged to submit questions ahead of time and/or bring clinically relevant questions which will be addressed by a multidisciplinary panel of experts

12:30 – 13:15  Lunch

13:15 – 14:30  Delirium:
Part A: Prevention, Early Detection, Treatment
Karl Looper, MD, FRCPC
After attending this presentation, participants will be able to:
1. Institute an approach for the early detection of delirium in end-of-life patients.
3. Recognize and address the “delirium dilemma”: how to balance the necessary use of medications that cause delirium with the need to prevent or minimize delirium.
4. Formulate realistic delirium management goals.
5. Identify strategies for the medical management of delirium in the palliative care setting, particularly the management of agitation.

Part B: Psychosocial Implications of Delirium: A Constructivist Approach for Prevention and Postvention
Chris MacKinnon, Ph.D., OPQ Psychologist
After attending this presentation, participants will be able to:
1. Discuss the common psychological manifestations of delirium with patients.
2. Identify responses to delirium for patients, family caregivers, and professional staff.
3. Highlight the main tenets of a constructivist psychotherapeutic-approach to assessment and intervention.
4. Delineate a constructivist informed for working with delirious patients, as well as family caregivers, children and staff.
14:30 - 14:45  Break

14:45 – 16:00  Medical Cannabis in Palliative Care: Current and Future Directions
Antonio Vigano, MD

After this presentation, participants will be able to:
1. Identify different indications of the use of cannabis in palliative care (e.g. medical, existential).
2. Describe the pharmacology of cannabis and its impact on end-of-life symptom management (e.g. pain, nausea, anorexia/cachexia, depressed mood).
3. Site key strategies/practice guidelines to direct usage of medical cannabis.
4. Demonstrate increased knowledge of current regulations and prescription protocols for cannabinoids at the end of life.
5. Develop an approach for the integration of cannabis into palliative care practice.

Registration

Last Name: ___________________________________________________________
First Name: ___________________________________________________________
Profession: ___________________________________________________________
Address: _____________________________________________________________
City: ______________________________ Prov: __________ Postal: _____________
Telephone: ____________________________ FAX: __________________________
Email: _______________________________________________________________

Please make your cheque payable to McGill University and mail it to: Palliative Care McGill c/o CPE Day, MUHC Cedars Cancer Centre, 1001 Decarie Blvd., Room D02.7236, Montreal, Quebec  H4A 3J1

- Specify dietary restrictions: ________________________________________________
- Specify: printed handouts ________________   or, USB key _________________

$200 for practicing health care professionals, $80 for medical residents/students (fee includes continental style breakfast, delicious hot lunch, and snacks)
Palliative Care McGill would like to thank the following sponsors:

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