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Abstract

### **PALLIATIVE MEDICINE – THE NUCLEUS OF MODERN BIOETHICS**

Palliative medicine/care starts when classical methods of treatment have been exhausted, or when the symptoms of a malignant disease reach a level that a patient can hardly endure. It encompasses three areas: soothing the symptoms, giving psychosociological support to the patients and their caregivers, and dealing with ethical problems concerning the end of life.

Connection between the bioethics and the palliative medicine is in 4 basic principles of modern medical ethics – bioethics: beneficence, nonmaleficence, autonomy and justice. Palliative medicine is the medical discipline focused on the relief of suffering and the promotion of quality of life. The term "palliative care" may be used generally to refer to any care that alleviates symptoms even if there is hope of a cure by other means; thus a recent WHO statement calls palliative care "an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness.

"Palliative care relief from suffering, focused on the treatment of pain and other distressing symptoms, psychological and spiritual care and on the ethical aspects in end-of-life care and support system to help the individual live as actively as possible, and a

support system to sustain and rehabilitate the individual's family. Beside the relief from suffering, psychosocial aspects the patients and caregivers very important part of palliative care/medicine are the bioethical aspects of care. Due to the emphasis it places on clinical activity, clinical bioethics greatly depends on the interaction of clinicians and patients in everyday repression of diseases. In palliative medicine that is *conditio sine qua non* for quality and human care for patient.

Key words: palliative medicine, palliative care, clinical bioethics, bioethics