Advik help sheet



What sort of decisions will Advik and Aesha need to consider as his disease progresses further?

- Place of care and place of death.
- Artificial hydration and feeding.
- How they wish to respond to infections, i.e., aspiration pneumonia.
- Whether he wishes to use non-invasive ventilation (NIV) – i.e., BiPAP as his breathing worsens in the future.
- How to discuss his condition with their children, wider family and friends.

How could Advik and his family be supported?

- Local MND field workers have an important role in coordinating care and supporting both the person with MND and their family and whānau. Interdisciplinary support will be essential. Advik will need the expertise of a range of professionals, including speech and language therapy (for communication and swallow), physiotherapy, occupational therapy, dietician, GP, social work, nursing, and possibly counselling. Specialist counsellors and social workers may be able to support his young children as they come to terms with their father's progressive illness and death.
- A social worker will be able to help Aesha address financial concerns and apply for benefits, and with carer respite funding.
- Equipment will be necessary to facilitate independence, and to allow Advik to be safely cared for at home.
- Advik and Aesha may want support with future care planning and will writing.
- Advik may wish to complete an ACP or a biography of his life, or participate in memory-making activities with his children.
- Family, friends and community members – i.e., school and church whānau may be able to play a role in supporting Advik and his family with childcare, meals and other practical input.

What pharmacological treatments would you consider to assist Advik with constipation and nausea? Use the Palliative Care Handbook to support your answer.

- Oral laxatives – laxsol 1–2 tabs oral twice a day, Molaxole, if able to tolerate fluid. Use suppositories or enemas as required.
- Metoclopramide 10 mg oral three times a day, 30 minutes before meals, if possible.