



## Specialist in palliative medicine talks about easing suffering

Tuesday January 24, 2017 12:01 AM

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READING, PA



| Dr. Vinti Shah

A specialist in palliative medicine says understanding the wholeness of the patient is a key to helping him or her.

Suffering is not something most people like to think about, but it is a very real and present condition, according to Dr. Vinti Shah, a specialist in palliative medicine and chief of the Section of Palliative Medicine at Reading Health System.

Shah spoke to a group of caregivers and health care professionals recently during a meeting of the Berks County Circle of Life Coalition, a nonprofit organization that seeks to educate the public on issues relating to the end of life.

While suffering is sometimes unavoidable, it can be lessened with the use of tools such as careful listening, asking the right questions and getting involved in a patient's life, Shah said.

"It's just about understanding the wholeness of a person," she said.

Shah explained that a person who is suffering due to an illness or condition is affected emotionally, physically, psychologically, socially, spiritually and culturally.

A patient may fear for his future, or for the future of a family he is no longer able to support.

Another might worry that her children won't remember her when she is gone. Someone else may mourn the loss of his identity as an athlete after a debilitating accident.

"People suffer differently, and we need to acknowledge that different types of suffering occur," she said.

Some of the most important things a caregiver or health care provider can do for a person who is suffering is to ask questions and be prepared to listen intently to the patient's answers.

"Find out what's really going on with that person," Shah said. "Listen both to what they say, and how they say it."

As the medical field has advanced and changed over the years, the way patients are treated also has changed.

Rather than one physician providing the entirety of a patient's care, that care is divided up among members of a team that might include nurses, therapists and others.

"That kind of care is fantastic, but it comes with a cost," Shah said. "The patient's care gets fragmented."

When care is fragmented, the ability to treat a patient as a whole person can become jeopardized. A physician or caregiver cannot really treat a patient effectively without knowing who that patient is, Shah said.

"You need to have a relationship with the patient," she said. "Instead of asking how someone is, we should ask who someone is."

When a physician understands who a patient is, he or she is able to form a relationship that can help to relieve suffering and aid in healing.

"By listening to a patient's story, I become a part of that story," Shah said. "I become a part of her life."

The presence of another person assures that a patient no longer suffers alone, and that can be a huge source of comfort.

"It allows the patient to borrow on your strength, and that can bring a patient back around to wholeness," Shah said.

Even if a patient cannot be physically healed, suffering can be lessened.

Shah related her experience of treating a woman in her 30s who had been diagnosed with colon cancer. The patient was experiencing suffering, and Shah sensed it was more than physical pain. Eventually, the patient related that both her grandmother and mother had died of colon cancer while in their 30s, and she feared she would, as well. Her greater fear, she told Shah, was that her young children would not be able to remember her.

Shah asked questions of her patient and practiced what she calls "generous listening" as the young woman talked about how she was feeling. With a goal of relieving the patient's fear and alleviating her suffering, Shah sat with the patient and helped her write a letter to her children.

"Her pain was lessened," Shah said. "She wasn't healed, but her suffering wasn't as great."

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