



ALS - Putting Ease in the Disease

May 22, 2021

Case Study 1: "JL"

64 y/o male diagnosed with ALS in May 2020. Six months ago (Nov 2020), patient was working and independent with ADLs. A PEG was placed last month and is tolerating tube feeds though experiencing increased constipation. Recently, he experienced a rapid progression of his ALS – mostly chair-bound and now on BiPAP 24/7. Patient lives with his wife who is his primary caregiver though she is still trying to work from home.

Palliative Care has been meeting with patient and it has become apparent that patient remains unsure of his goals of care and has not completed a POLST. His wife is requesting hospice.

On hospice admission, patient c/o shortness of breath, anxiety and constipation.

Allergies: NKDA

Medications:

Riluzole 50 mg BID

Morphine 5 mg Q4 hours PRN dyspnea (concentration 20mg/ml)

Senna 2 tabs BID

Group Discussion:

What are the issues?

What other information would be helpful to know?

What pharmacological intervention might you recommend?

What non-pharmacological intervention might you recommend?



ALS - Putting Ease in the Disease

May 22, 2021

Case Study 2: "PT"

63 y/o female with bulbar ALS. Patient cannot speak and communicates through typing on her iPad. She had a PEG tube placed 6 months ago though continues to have ongoing issues of constipation and diarrhea. Patient has been struggling with mucous and coughing which is very bothersome and burdensome. The "coughing fits" result in patient getting upset and anxious. She lives with her husband and her daughter visits often and helps care for her.

During hospice admission visit, patient is very emotional and is crying through most of the visit. The hospice team has learned that patient has EOLOA medications. She has worked with the Palliative Care clinic to qualify for EOLOA and is now struggling to figure out when she wants to take these medications.

Allergies: Morphine

Medications:

Lasix 20 mg PEG Qdaily

Celexa 30 mg PEG Qdaily (concentration 10mg/5 ml)

Nuedexta 1 capsule PEG BID

Glycopyrrolate 1-2 mg PEG TID

Mucinex 600 mg PEG QID

Tylenol 640 mg PEG Q6 hours (concentration 160 mg/5 ml)

Dilaudid 2 mg PEG Q4 hours PRN pain (concentration 1mg/1ml)

Senna 10 ml PEG BID PRN constipation (concentration 8.8 mg/5ml)

Group Discussion:

What are the issues?

What other information would be helpful to know?

What pharmacological intervention might you recommend?

What non-pharmacological intervention might you recommend?