



PRPCS Annual Report- 2024-25

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PAIN RELIEF AND PALLIATIVE CARE SOCIETY, KUMUDINI DEVI PALLIATIVE CARE CENTER

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President's Message

I will start this year's message with a small story. A prof of psychology told his students one day to take the day off and go to the movies and rate the experience on a scale of 1 to 5. He repeated it next day by taking them to a nearby orphanage and made them give gifts and play with the kids and then rate the experience. After 6 months he asked the students to rate both the days again. No one even remembered the movie but everyone still rated the orphanage visit as a memorable experience.

This explains the effect on our minds when what we do impacts those in need of help. It's true Karma yoga. And year after year when thousands of end stage patients benefit from our services we in PRPCS can say with pride in our voice that our lives are meaningful and purposeful. One more year has passed and our Home care Hospice care and Pediatric programmes are all running successfully thanks to all our donors and to all our dedicated and sincere staff.

J.N. Jagannath, President, PRPCS

Executive Summary

Pain Relief and Palliative Care Society (PRPCS) is a registered charitable organization working in the field of providing palliative and end of life care for patients suffering with terminal illnesses like end stage cancer etc. Over the years, PRPCS has grown into one of the largest palliative care service providers in the region with a staff of 81 personnel consisting of Doctors, Nurses, Counselors and other support staff. All our services are provided *entirely free of cost*. All of our patients are from the poorer sections of the populace. PRPCS is one of the largest palliative and end of life care service providers in the region running four major programs namely:

1. 36 beds adult hospice called Kumudini Devi Hospice (25 for adults and 10 for children)
2. An extensive 12 van Home Care Program called Life At your Door Step in Hyderabad and its environs (9 for adults and 3 for children)
3. Pediatric Palliative Care Program with teams consisting of Doctors, Nurses and Social Workers embedded in the Pediatric palliative care program of MNJ Govt Cancer Hospital and Niloufer Govt Children's hospital

All the services in our programs are given entirely free of cost as most of our patients are from the poorer sections of the populace. Details of patient beneficiaries in all our programs are as given below for the year FY 2024-25.

Mission:

Mission: To increase the availability and access to quality palliative care for patients with incurable illnesses and their families.

Vision:

Vision: To alleviate the physical and psycho-social suffering associated with progressive, incurable illnesses

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Achievements and Highlights

1. International Nurses Day Celebration

“Nursing is an art: and if it is to be made an art, it requires exclusive devotion, and as hard a preparation, as any painter’s or sculptor’s work.” - Florence Nightingale

PRPCS has celebrated, brought together and devoted it’s time to all the palliative care nurses working in our organization on the occasion of International Nurses Day. Nurses are our silent and the behind-the-scenes pillars, our palliative care nurses, who work so firmly yet gently, to ensure the provision of quality palliative care for their patients’ and their families.

Acknowledged and congratulated every single palliative care Nurse working across all our palliative care programs, for all that they do. They are truly our Superheroes!

<https://palliativecarepartners.in/nurses-day-celebration-at-kumudini-devi-hospice-17th-may2024/>



2. 75th & 76th Batch of Certificate Course in Pain & Palliative Medicine/Nursing/ Care

Pain Relief and Palliative Care Society conducted its 75th & 76th batch of one month certificate course in pain and palliative medicine/ nursing/ care for Doctors, Nurses and Counselors. This is a collaborative course between MNJ Institute of Oncology & RCC and PRPCS since 2007. 15 Doctors, 10 Nurses and 4 counselors and psychologists underwent this course from different parts of the city and states.



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PRPCS organizes a Pediatric Bereavement Memorial Support Group

The Pain Relief and Palliative Care Society (PRPCS) had organized a poignant reflection of a profound, yet a transformative and encouraging event in life, by organizing a Pediatric Bereavement Memorial Support Group event on Tuesday, 22nd October, 2024, at Hyderabad. The program was attended by 22 families (7 Cancer; 11 Non-cancer; and 4 Perinatal), Paediatric teams from PRPCS and MNJIO, Perinatal Teams, treating Oncologists, volunteers of PRPCS, general community, and Make A Wish Foundation members. There was also an explicit expression of gratitude by the parents as a wish to continue their relationship with PRPCS teams. The parents were thankful for the event where they could share a lot of happy and painful memories of loss and found it to be very therapeutic. The song might have ended but the melody continues, together let us continue to hum... <https://palliativecarepartners.in/bereavement-memorial-service/>



3. Evidence Based Palliative Care Symposium:

The first-ever symposium on 'Evidence based Palliative Care' was conducted in Hyderabad in the memory of Dr. Jella Nandedkar on 26th October 2024. The symposium was organized jointly by the Indo-American Cancer Association and the Pain Relief and Palliative care society Hyderabad. The event brought together prominent professionals to discuss evidence-based practices and advancements in palliative care. The symposium then proceeded to cover significant topics by eminent faculty members. Sessions on Implications of burnout among healthcare providers, Evidence surrounding serious health-related sufferings, Trends and evidence in managing chronic pain in children. The symposium emphasized the need to practice evidence based palliative care in India. <https://palliativecarepartners.in/1570-2/>



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4. Leadership Development in Pediatric Palliative Care: Children's Palliative Care Leadership Programme being held in Hyderabad, India from the 26th January to 28th January 2025. The Children's Palliative Care Leadership Institute is an innovative training programme which commenced in 2024, bringing together a diverse group of emerging healthcare leaders from nursing, medicine and allied health fields and seeks to equip them to lead and champion healthcare innovations in children's palliative care within South and Southeast Asia. This year there are 22 scholars from India (13), Nepal (3), Philippines (2), Vietnam (1), Bhutan (1), Sri Lanka (1) and Pakistan (1), including Doctors (14), Nurses (4) Psychologists (2), Social Worker (1) and Administrators (1). The programme is a joint initiative of Two Worlds Cancer Collaboration (TWCC), Pain Relief and Palliative Care Society (PRPCS), Sunflower Children's Network, Hyderabad Centre for Palliative Care, Canuck Place Children's Hospice, the International Children's Palliative Care Network (ICPCN), St Jude Global Palliative Care, Cipla Foundation, Division of Quality of Life and Paediatric Palliative Care Stanford University, and the Global Treehouse Foundation. Dr Gayatri Palat then talked about the 5 exemplary practices of Leadership (Kouzes and Posner): Modelling the way, Inspiring a shared vision, Challenging the process, Enabling others to act, and Encouraging the heart. <https://palliativecarepartners.in/leadership-development-in-pediatric-palliative-care-2025-26/>



Program Overview: Program Services, Beneficiaries and lives touched

Hospice Care Program

Adults-1013
Children - 367
Total - 1380

Home Care Program

Adult visits- 12093
Children visits - 3738
Total - 15831

Supporting Pediatric Program in MNJIO&RCC and Niloufer Children's Hospital

Cancer - 443
Non-Cancer- 726
Total - 1169

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Financial Overview: Income and Expenditure Summary

S.No	Particulars	Amount IN ₹
1.Receipts		
A	Donations	5,98,79,720
Total Receipts		5,98,79,720
2.Payments		
1	Hospice Program	1,20,00,000
2	Pediatric Program	1,68,49,805
3	Adult Home Care Program	1,13,40,000
4	Kurnool Program	24,61,830
Total Payments		4,36,51,635

Donors and Funding Sources: Partnerships and Collaborations

1. Azim Premji Philanthropic Initiatives
2. Cipla Foundation
3. Vaha Foundation
4. Two Worlds Cancer Collaboration, Canada
5. Dr. Reddy's Laboratories
6. Blue Younder & International Association for Human Values
7. Viruj Pharmaceuticals
8. Value Labs Foundation
9. Fernandez Foundation
10. Olive Crypto
11. MNJ Institute of Oncology & RCC
12. Niloufer Children's Hospital
13. Roshni Counselling Trust
14. Hyderabad Pain and Palliative Care Trust
15. Many other donors both big and small

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Board of Directors:

1. Mr. JN. Jagannath, IRTS, President
2. Dr. K. Anita Reddy, Vice President
3. Dr. BV. Manjula - Secretary
4. Dr. Sreekala Nambiar- Joint Secretary
5. Dr. D. Priya Kumari- Treasurer & Founder
6. Dr. Gayatri Palat, Founder & Executive Committee Member
7. Dr. C. Sanjeeva Kumari, Executive Committee Member
8. Dr. Sudha Sinha, Executive Committee Member

Few Testimonials

Goodmorning madam

I am Kiran Kumar from Ramanthapur today morning Ms.Ashalatha had visited our home and seen my father Dr.K.Amrut 84 years who is bedridden and suffering from multiple complications.

She has listened to us very patiently checked all the medical records and the latest discharge summary of Care Hospital Nampally, seen the patient and has given excellent advice and in detail has guided us as to how we should take care of him daily and how his physical,mental and emotional health has to be balanced.

I personally thank you from bottom of my heart for your prompt support and the services what you are providing for the medically challenged patients and their families.

Thank you,Thank you,Thank you.

Good morning,

The home care team of Dr.Sameena , Mr.Kumar and sister Lakshmi visit my father Abdul Hameed khan regularly.

He is having dual malignancy with bony metastasis .He was suffering from shoulder pain .

My father feels much relaxed with their care and treatment approach.

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They listen to my father patiently and give enough time at our home .

We appreciate the home care team for their support and sincere efforts .We feel they are like our family members .

Thanks a lot .May God reward them for their efforts .

With a heavy heart I lost my Co sister in law April 18 th sir just wanted to inform you. Within 45 all over sir we lost her .

Thanks so much for you caring support

Your staff were really very kind caring concerned it feels so good specially in this jet set world to see such nice staff in your hospice and the mobile homecare.

Specially Lalitha at the hospice she is such an amazing lady and Was very kind and helpful.

And another girl I wish to really says thanks and be grateful to is Anusha in the mobile home visit van.

Thanks once again sir . God bless you all for the great and commendable work your doing for people with this merciless disease and caring for their near and dear too.

Dear Ms. Rajitha, Dr. Sunil, and Mr. Allah Baqsh,

Your compassionate care and selfless dedication to my mother, Mrs. E.K. Padmini, during her final journey were truly remarkable. Your patience, guidance, and support eased our burdens and provided immense comfort during a challenging time. Words cannot express our gratitude for the invaluable service you provided through the Pain Relief and Palliative Care Society (PRPCS). Thank you, Rajitha, for being our guiding light.

With heartfelt

appreciation,

Ramkrishna,Ambica and Arundhathi

Good morning rajitha garu .iam a daughter of Mrs farzana begum cervical cancer patient.who passed away on 12th May.

Iam really thankful to you and allabaqsh who not only performed ur duty with 100%responsibility but also give ur service with lot of care love and affection towards patient.

Thank you rajitha garu for responding our calls at late night too nd guarding us with patience and care .

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Dear Rajitha and palliative care staff,

We are very grateful for your services. You were there with us guiding, helping and consoling when we needed you the most. My father always felt relieved whenever you visited. Until the very last day, your relentless support gave us strength to deal with the most difficult situation of our lives. We would like to support you in your mission to help people in palliative care in whatever way possible. Once again we thank you so much.

Gratitude and Praise for the Compassionate Team at Pain Relief Palliative Care Van 3T

I am forever grateful to the exceptional team at Pain Relief Palliative Care Van 3T, who provided unparalleled care and support to my father during his courageous battle with stage 4 mouth cancer.

Doctor Suniel, your expertise and empathy were a beacon of hope. Your guidance alleviated our fears, and your compassion inspired strength.

Sister Vijaya, your nurturing touch and gentle care brought comfort to my father's struggles. Your dedication is truly admirable.

Driver Srinivas, your kindness and assistance ensured seamless travel, easing our burdens.

Counselor Venkatesh, your emotional support and counseling helped us navigate the darkest moments.

Doctor Farheen and counselor at Kumudini Devi Palliative Care, your sensitive care for my mother during the most devastating hour is etched in our hearts. Your kindness helped stabilize her in unimaginable grief.

Each of you went above and beyond, providing physical, emotional, and spiritual solace. Your selflessness, expertise, and warmth eased our journey.

Thank you for:

- Unwavering support
- Expert care
- Compassionate listening
- Guiding us through challenging decisions
- Being a reassuring presence

Your tireless efforts made a profound difference. We are indebted to you for honoring my father's life with dignity and love.

May your noble work continue to illuminate hope in the lives of those suffering.

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With deepest gratitude,

[Hussna ghazal]

Dr Sunil Kumar sir, Thank you very much for all your services sir. We and our family are much appreciative of all your services. All the members of your group including you, Rama Devi, Venkatesh have been extremely kind, empathetic to my mother and us. Thank you for your prompt service. We are very grateful to have found you all, you are all god sent for us

Pt Balasubramaniam daughter

Good morning sir

As my father C.Manoj Kumar (45 years old) was facing with the problem CA Tongue part S/P CT-RT . He got diagnosed firstly in the month of September 2023. Then we had treatment in the Omega Hospital. Then he got better again now reoccurrence of S/P Pal UT and also C Brain Mets in March 2024. Then we were approaching MNJ Institute of Cancer there they explained the process and after knowing it the PRPCS were visiting our home (Palitative Home Care Van-4). I was very impressed with the professionalism of the staff , particularly Dr.Sameena madam and K.Kumar(Social Counsellor) and Lakshmi(sister) , who took the time to thoroughly explain my father's condition and treatment and its sideeffects which would be taken cared by them .If any problem or side effects would occur they used to come as fast as possible and they explain clearly and give medicines and they take care very well without any hesitations .They also answers every call at any time if any emergency is there they suggest very faster and make sure that everything is good .Many problems were cleared by them .They give courage in their presence we feel better . I felt very happy with their care . And we are very thankful for the palliative home care and team.

I would like to extend my heartfelt gratitude to Mr. Hussain and Ms. Sandhya from 'Pain Relief Palliative care society' for their unwavering support to address and help with my mothers illness.

They have been available to support us through weekly home visits as well as phone calls to look after my mother's health and make sure she is at ease. As per the need they used to cooperate with doctors and other authorities from MNJ institute as well to discuss about various symptoms.

Would like to Thank the entire team of Pain relief Palliative care society for supporting critically ill patients and helping families with such consistent care and visits!

Thank you, please keep up the fantastic work!

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I would like to extend my heartfelt gratitude to Mr. Venkatesh (Councillor) and Ms. Vijaya (Sister) from 'Pain Relief Palliative care society' for their unwavering support to address and help with my father's during his courageous battle with stage 4 Lungs Cancer illness.

They have been available to support us through weekly home visits as well as phone calls to look after my father's health and make sure he is at ease. As per the need they used to cooperate with doctors and other authorities from MNJ institute as well to discuss about various symptoms

I Would like to Thank the entire team of Pain relief Palliative care society for supporting critically ill patients and helping families with such consistent care and visits!

Thank you, please keep up the fantastic work!

I would like to extend my heartfelt gratitude to Ms. Thrithpamma (Councillor) and Ms. Vijaya (Sister) and DR. Sunil from 'Pain Relief Palliative care society' for their unwavering support to address and help with my father's during his courageous battle with stage 1 throat Cancer illness.

They have been available to support us through weekly home visits as well as phone calls to look after my father's health and make sure he is at ease. As per the need they used to cooperate with doctors and other authorities from MNJ institute as well to discuss various symptoms.

I Would like to Thank the entire team of Pain relief Palliative care society for supporting critically ill patients and helping families with such consistent care and visits!

Thank you, please keep up the fantastic work!

Regards,

Mohd Ashraf Ali.

Success Stories

A 54 year old gentle man, who was energetic, lived dynamic life and loved to cherish every moment of his life. He was married, has 2 children (son and a daughter). He used to works as the type write assistant to an advocate. He always used to dress well with fastidious care. Everything was going well, until one day he noticed a lump on the penis. He felt its not normal. He always thought of himself as a healthy person until he was diagnosed with cancer of penis. It was shock to him and his entire family. He got operated, relevant treatment was such as as chemotherapy and radiotherapy. Eventually he faced economic burden and then visited the Government when he could not afford the cancer treatment. The disease was extensively progressive and was referred to pain and palliative care for pain relief and then subsequently to kumudini devi hospice for his uncontrollable and unmanageable symptom load. He was in terrible pain, delirium, constipation, bed sores and not in a position to communicate. Wife shared her perspective of the patients condition and was aware of the

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current condition, diagnosis and prognosis of the disease. Her major concern was to keep him pain free and as comfortable as possible though the disease cannot be cured and she was not able to see her husband suffering. She started sharing their story when he was normal and shared couple of memories how good person was he as a responsible husband and father.

Initially it was tough for him to accept, but he stood strong and continued to take treatment hoping for cure. Day by day his condition started deteriorating and he became unconscious.

Family was extensively counseled about the goals of care and comfort care and re assured them. Also explained about how important it is to touch and feel the patient though he is unconscious. Family was glad to know that. One fine day, patient died peacefully in our hospice.

Few weeks later, wife came all the way to hospice with her children to thank the hospice team that we gave him good quality of life towards the end. During that visit, family was provided with grief and bereavement support as well remembering their loved ones saying they feel he is with them in their memories.

A 38 year old man, married and was blessed with 2 year old son. He used to work as the driver and lived with his own happy and small family, until he was diagnosed with life-threatening illness, cancer of the tongue. Wife and he was shattered by this diagnosis.

Initially it started with redness in the oral cavity and visited multiple hospitals in the district and then he was referred to higher centre, government hospital in Hyderabad. He took chemotherapy and radiotherapy. Slowly his disease progressed and developed fistula, facial puffiness and redness and diagnosed with DVT on the left hand. Looking at the patients symptoms, the treating doctor referred him to palliative care as there was no role of active treatment to cure the cancer.

We interacted with wife and elicited concerns as she was the primary carer for the patient. She started bargaining to treat the cancer as she was only married 3 years ago and will be left with 2 year old son. She has lots of spiritual distress and angry with her parents and hide the information that her husband has habit of chewing tobacco and was alcoholic. She blamed her in-laws as-well. She felt and expressed that she is the final victim of the cancer in her family and asking what will be her future and his future of her kid She was exhausted mentally and physically taking care of her husband on her own and no source of support or income. Had to explain in depth about cancer, diagnosis, prognosis and made a care plan. Goals of care like comfort care and how we can manage the symptoms like pain have been explained to her. One of the days during the admission in the hospice, patient died and wife became uncontrollable and couldn't stop her tears even for a minute. Bereavement support was extended to the wife over phone call.

A 40 year old gnetleman, got married, 2 children. He lost his father, He has 2 sisters who are married, He used to work as a photographer till the onset of the illness. He was hardworking, energetic and active all the time before the illness. Everything changed in just one year.

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Initially, he was complaining of symptoms such as pain in the abdomen and on and off episodes of vomiting. When it was severe, he got to see the local doctor. From there he was referred to higher centre. All the investigations are done and biopsy was performed which resulted in carcinoma stomach. He underwent, chemotherapy in his native place in private hospital. But the disease was progressive in nature. He was referred to kumudini devi hospice by a known doctor. He was admitted with high symptom load. With all the medications, his symptoms are controlled.

During the conversation with the patient and wife, patient is aware of the diagnosis and only wife is aware of the prognosis. Patient expressed that he is very passionate about his profession and says he helped so many people. He expressed spiritual distress, like why only me, and tried and pretended to be strong in front of the family members. He expressed that his own family and relatives stopped visiting him after this disease. He shared that, its not cancer and someone has done black magic on his and hence he is suffering and mentioned his mother must have done for the sake of property. He wished that he should try to detach from his wife and kids so that they will not feel so attached if something happens to him in the future.

As the palliative care we had to acknowledge all his concerns so that he elicited his fears, worries etc. Had to give warning shot about his disease condition and prognostication of the disease and chances of death. Finally patients wish is to go home. We handed over the patient to one of the district palliative care centres in Telangana and followed up on phone till the end. Patient passed away at home with their family members side by.

Bereavement phonecall was made over the phone to wife and she mentioned that the death was peaceful and comfortable. She shared few more memories over the phone whole her husband was alive.

Umar Patan, 10 year old, Male child was suffering from Acute Lymphoblastic Leukemia. Although the parents and Oncologist tried best for treating him, child had episode of seizure and on investigations it was found that cancer was spread to Brain as per the reports. Then the child was handed over to Palliative care for Symptom management, seizure control, end of life care and good quality of life. Then the child was sent to hospice for much needed personalized care for the child and parents. They are native of Kadapa. Father works as mason and mother home maker. They left another sibling at their relatives home. Child was totally unconscious when received. After stabilizing the child, we have to take the discussion forward in explaining current condition of the child, goals of care, end of life and the care plan. Both parents in denial and told. 'Say something else other than our child is dying'. It was very difficult to manage that situation knowing that child did not have much time left. And said, I wish to tell that your child won't die, but worried and scared that he may die at any time.

Felt so uncomfortable doing that. Mother fell on feet saying, 'kuch bhi Karo, Mera baccha ko teek karo' 'aise mat bolo ki woh marne wale hein'. Felt really bad and sad to hear such words. We had to stop the conversation there, not knowing what to do. After 3 days of admission, child deteriorated further and it's high time we make a death care plan. Had to call father once again and plan for it. Father was totally blank and didn't utter a word. With great difficulty father said I don't not have single rupee and to to take my child home in ambulance it's going to cost more than 15000. PRPCS approached few donors, all of them came forward and donated whatever they could from their side. Finally we could send Umar in dignity to his home in a respectable way.

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Sometimes just a SMILE gives us immeasurable happiness and makes us forget all the efforts we put in!

Ayesha, (name changed) 13yrs, was suffering from Acute Lymphoblastic Leukemia who has been taking treatment for the last one year. Due to her cancer treatment, She completely lost her long hair. While this child was admitted to Mandara children's hospice, during our conversation, she mentioned that she wishes to have long hair and loves it. With the help of a local organisation which supports donating wigs for cancer patients, they came forward with the wig to give it to the child and gifted her. The moment she gazes at herself in the mirror wearing it, her face is filled with joy by her parents.

To see the pure smile deep from her heart, is the most beautiful experience. That radiant smile is the greatest value, got for all our efforts we vested!

This is the story of our dearest patient Sandhya, 23 years, with Ca. Stomach and Ca. Ovary. Do not have parents. Had 2 brothers and one died in an accident and left with one brother. She got married during Covid and blessed with 2 kids. 3 year old diagnosed with cancer and by grace of God her treatment was completed and she is under remission and doing well. Story doesn't end here. While she was expecting her child and scan period the Drs felt there was a tumor in her stomach and suspected to be cancer. Induced baby at her 7th month pregnancy and was sent for further investigations and biopsy which was a nightmare to her and turned out to be malignancy cancer. She struggled to take the treatment and took 5 cycles of Chemo. Her health did not support and with ascites in her abdomen, severe pain, very frail, with just skin and bone and had sleepless nights. She was referred to palliative care for pain management and symptoms control. During the conversation with husband, he was hopeful that she will somehow complete the treatment and will be alright. Then took his permission to speak to the patient to find out if she has any worries, wishes and concerns. During the conversation and after making friends with her, to the surprise, she mentioned, ' I KNOW I WONT GET ALRIGHT AND MY DISEASE CAN NOT BE CURED' with tears rolling down. She expressed that what will happen to her 2 kids if she dies and that's her biggest concern and because of that her pain is not getting better and was not able to sleep and having bad dreams. Assured our pc team will take care of her pain. She spoke very high about her husband and he taking very good care of her. During the conversation, issues around intimacy and sexuality were also discussed. She is worried that her cancer will spread to her husband and their relatives and neighbours eliminated to the extent that didn't allow her to give breastfeeding to her new born baby and they didn't allow her husband even to touch her or hold her hand. While expressing her wishes, she said, in case if I die, my children will not know how her mother looked and we didn't have our wedding photo or family photo. She said, my children should be able to see me in the photo how their mother looked and wanted to wear a lehanga. With help of donors we could arrange for it and her wish was fulfilled. Don't know how long she will survive, but definitely could see today her pain coming down, she could sleep well and went home saying will come back after 10 days and thanked each and every team member of pc

Looking Forward

PAIN RELIEF AND PALLIATIVE CARE SOCIETY, KUMUDINI DEVI PALLIATIVE CARE CENTER

No. 1-6, New Vivekananda Nagar Junction Colony, Inside Sivananda Rehabilitation Home, Kukatpally
Hyderabad, Rangareddy District – 500072, Phone: 9177238901, Email: palliativecarepartners@gmail.com
Website: www.palliativecarepartners.in



Our mission is to **increase access to quality palliative and end-of-life care** for those who need it most. To achieve this, we focus on **capacity building, raising awareness, and strengthening our referral networks** through close collaboration with healthcare professionals and partners. While many of our referrals come through word of mouth and our strong relationships with oncologists and other specialists in the city, we are committed to expanding these networks and improving accessibility for all who need palliative care.

We regularly conduct **training and educational activities** to enhance the skills of doctors, nurses, social workers, and other healthcare workers. Additionally, through traditional and social media, we aim to **raise public awareness** of palliative care, thereby increasing community demand for these services.

Our care delivery is comprehensive, encompassing **out-patient, day care, in-patient & hospice services, home-based care, and virtual care** through 24-hour phone, video, WhatsApp, and email consultations. Importantly, all of our services are provided **free of cost** to ensure equitable access to care.

Future Plans and Goals

Behind the numbers we report are **extraordinary stories of hope, courage, love, and compassion**. Our patients are not just statistics—they are people confronting the profound reality of life's end. Caring for them requires **immense dedication, empathy, and selflessness**, qualities embodied by our staff of doctors, nurses, social workers, and volunteers. Their tireless efforts ensure patients and their caregivers receive **comfort, dignity, and support** during some of life's most difficult moments. However, palliative and end-of-life care remains a topic that many shy away from unless they have experienced terminal illness firsthand. Sadly, our current health system does not adequately support this form of care. While widely recognized in developed nations, **palliative care in India** is still in its early stages and primarily driven by **NGOs**. These organizations, like ours, rely heavily on **CSR funding and donations**, as it is neither feasible nor ethical to charge the socio-economically disadvantaged patients who benefit from these services.

With the **increasing burden of cancer** and the late diagnosis often seen in our country, the need for palliative and end-of-life care is more urgent than ever. Our mission to alleviate pain and suffering among terminally ill patients can only continue with the support of individuals, corporates, and society at large.

Strategic Initiatives

Expanding Comprehensive Palliative Care: We aim to provide **continuum of care** across hospital, home, and hospice settings. Additionally, we are committed to collaborating with **district-level palliative care centers** to extend services to resource-limited areas. Our model can be replicated in similar settings and expanded to include patients with other life-limiting conditions. By developing **pilot programs**, we hope to inspire local physicians to train in pediatric and adult palliative care and to advocate for the growing palliative needs of patients across the region.

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Partnerships with Government and Corporate Hospitals: Our focus remains on working closely with **Government Cancer Hospitals** and select corporate hospitals. Unfortunately, the reality is that only about 25-30% of cancer patients survive, despite undergoing surgeries, chemotherapy, and radiation therapy. The remaining 70-75%, many of whom come from **economically disadvantaged backgrounds** and are treated at government facilities, are in urgent need of palliative care. Our goal is to make **palliative care accessible to these patients**, ensuring they receive the compassionate and holistic care they deserve as they navigate the final stages of their illness.

These efforts reflect our continued commitment to **innovate and expand palliative care services**, ensuring that every patient facing a life-limiting illness receives the care and dignity they need, regardless of their socio-economic status.

Acknowledgements

We extend our deepest gratitude to every donor, both individual and institutional, large and small, for their unwavering support. Without your generosity, our work would not be possible and most importantly for all the patients and families for giving us the opportunity to serve them.

Since its humble beginnings in 2008 with just one home care van and a staff of three, **Pain Relief and Palliative Care Society (PRPCS)** has grown to become one of the largest palliative care service providers in the country. Over the past 15 years, we have expanded to a team of **81 dedicated professionals**, including doctors, nurses, social workers, physiotherapists, pharmacists, data entry operators, drivers, cooks, and support staff. This growth has enabled us to touch the lives of countless patients and families in need of compassionate care.

Our success is deeply rooted in the **generous funding** we have received from **CSR projects**, as well as through **crowdfunding** initiatives that have attracted the support of small and medium donors. As we look to the future, we aim to build upon our fundraising experience while also developing a **reserve fund** to ensure the **long-term sustainability** of our organization. Your continued support allows us to bring **comfort, dignity, and hope** to those facing life-limiting illnesses. Together, we can continue to make a profound difference in the lives of patients and their families.

Contact Information

For more information, please contact:

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Pictures which talk about our work



Home visits



Personalized care by understanding their needs

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Supporting a abandoned patient with his final rites



Fulfilling patient's wish for one last time



Personalized care by the home care team



Psycho-social support in the home



Reaching out to the most vulnerable patients



home care team

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Diwali celebration



Play therapy and Vehicle pooja on occasion of Dasara



Psychosocial care

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Caregivers meeting



Yoga session for staff and caregivers



Diwali celebrations



Serious illness conversations at the hospice

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