



Reply to the letter to the editor

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In reply:

As highlighted by Foley and colleagues, the Palliative Care is an often underutilized foundational pillar in the care of patients with advanced heart failure, an essential support for patients, their family members, and their clinical care teams. Palliative Care specialists offer critical assistance in addressing goals of care and advanced care planning and providing resources for patients and family when the end of life is near.

Early in the pandemic, faced with unknowns of optimal patient management and the complexity of medical decision-making coupled with the stress of high mortality and risk of contagion, patients, caregivers, and treating clinicians experienced immeasurable stress [1]. We agree that the fear and uncertainty of the pandemic only heightened the important role of Palliative Care in the management of our patients [2].

Another source of great stress was the isolation imposed by the pandemic, whereby hospitalized patients suffered limited family access and availability, resorting to video conference or telephone calls for crucial conversations. Employing the expertise of Palliative Care specialists, experts in delicate communication in times of grief and stress, offered a conduit to facilitate these fraught encounters [3].

We thank Foley and colleagues for their important insights. In all of our institutions, Palliative Care is an integral member of the multidisciplinary team managing patients with heart failure, post heart transplant, and on mechanical circulatory support. The challenges of the COVID-19 pandemic have only increased our reliance on

the critical role of Palliative Care specialists to forge connections with patients and their families in these stressful and often tragic times.

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Declarations

Conflict of interest Dr. Yehya has received honoraria from Merck, Zoll, Akcea Therapeutics, and CareDx.

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