

40 STORIES IN 40 YEARS

Dr Maria Pisasale



Dr Maria Pisasale has been involved in palliative care for almost her entire career. Over the years she has been a champion for change for people in communities who have faced life-altering and chronic illnesses.

Maria commenced her career at St Vincent's Hospital as a medical student in the 1960's.

The hospital, which is based in Fitzroy, also looked after Caritas Christi Hospice in Kew. In the 1970's, Caritas was still described as an 'aftercare hospital' and had a focus on caring for stroke patients, patients with other chronic illnesses and patients with end stage cancer.

"Palliative care is important because it improves the quality of life of patients and that of their families who are facing challenges with life-threatening illnesses."

"When I was a Senior Registrar at St Vincent's, the Medical Director Dr Keane, who also looked after the patients of Caritas, went on sabbatical for six months. He asked me if I would mind looking at the Caritas patients for this time. I would go out there twice a week and look after these 90 patients by myself. It was challenging, but the nursing staff were very good."

“Eventually Dr Keane returned and requested I continue overseeing the patients at Caritas. I did that for around 17 years. Eventually, it transitioned from being an aftercare hospital into a palliative care facility.”

Maria’s impact on palliative care services around Melbourne only grew from there. In the coming years she was involved with and helped set up a range of services including the Peter MacCallum Cancer Centre’s palliative care consulting service.

"My involvement with palliative care was never deliberate, I was asked to do it. However, I soon realised that there was a need for this service, and it aligned with my passion to help people."

"In the late 1980’s, while I was still working at Caritas Christi, I was engaged by the Peter MacCallum Cancer Centre to help set up the palliative care consulting service. I worked with a fantastic team there – Dr Kate Jackson, Dr Nell Muirden – to set up the service. I was involved with Peter MacCallum from 1989 until 2013.”

In 1995, Maria realised that around 25 per cent of the admissions to Caritas Christi were actually coming from the Western suburbs – places like Altona and Werribee.

“I made it clear to the Health Department that we needed more services out in the West. Around this time I was approached by the Medical Director of North West Hospital, Dr Eleanor Flynn, who invited me to open a unit at North West Hospital in Parkville. This is now a rehab centre that is run by the Royal Melbourne Hospital.”

“I worked with a small team of people, one of those being Dr Barbara Hayes, to create that service. We started off with eight beds in one of the geriatric wards at North West. Eventually the Health Department decided to move the beds across to Broadmeadows.”

“During the 90’s, I also started working in the community with Werribee Mercy Palliative Care domiciliary service. This covered an area from Little River to the City, covering the Western and part of the Northern Suburbs of Melbourne. I identified a need at the time for more palliative care beds so I worked with Mercy Health to secure some. I started off with two beds at Werribee Mercy Hospital. These increased to six, and then eight. Eventually we built a palliative care unit attached to the hospital with 12 purpose-built beds.”

Maria still works part-time at Werribee Mercy Palliative care to this day, a job which she says is ‘incredibly fulfilling’.

“We’re now a multi-disciplinary team. We have pastoral care, social workers, counsellors, physio and occupational therapy.”

"Working in the sector can be very challenging but nothing feels more rewarding than being able to help someone who is in need."

There have been many highlights in Maria's involvement with palliative care. She explains that although the end stage of life is a sad time, her work and ability to make a difference in people's lives are fulfilling.

"A moment in my career that will never leave my mind was when I cared for a man in his 50's suffering from liver cancer. He was a community patient, and we were looking after his pain management. I remember talking to him and expressing my concern for his current living condition but all he said was that he wanted to stay alive - comments like these stick with you forever."

"It's difficult facing situations that are beyond your control. I feel so powerless when I am caring for patients who are suffering from a life-ending illness because we cannot save them from the inevitable outcome. Our efforts lie in supporting the person to make them feel comfortable with medical and nursing assistance."

"Sometimes it's very hard to maintain your feelings and be emotionally calm when you're dealing with these circumstances. It takes a person with strength, kindness and empathy to be able to deal with these types of situations."

"There needs to be a stronger realisation that end of life is just as important as the beginning of life."

During her time in the sector, Maria expressed that the health department has become more aware of the need for palliative care which has helped the growth and development of the industry.

"I have seen vast changes in palliative care and I hope to see the progress continue. Firstly, palliative care didn't receive this name until the 80's and workers in this sector were just a part of the medical team. It's great to see that palliative care is now an extension of medicine and nursing in palliative care has become more skilled."

"There is also greater acknowledgement for the work that we do. Clinicians and younger graduates of medicine are more accepting of our service and palliative medicine skills than they were 20 years ago. Domiciliary services have also improved dramatically with multidisciplinary teams offering appropriate care for patients."

"However, there is still not enough funding on resources for the sector and there is still limited access. I would like to see domiciliary services more accessible for everyone with a life-threatening illness, and for those services to be properly staffed to cope with the need of patients and their families."

"For the sector to continue with advancing, peak bodies like Palliative Care Victoria (PCV) are key. Not only does an organisation like this pull everyone together, but PCV acts as an advocate and deals with the bureaucracy which I believe is very helpful with bettering the industry, services, resources and education."