



Palliative care should not be seen as a death sentence

Palliative care is widely misunderstood. Many assume it's just for the final days of life – a service focused on easing the process of dying.

That's not what it is. Palliative care doctors and nurses are really expert at improving quality of life through sophisticated symptom control. And there's evidence that introducing palliative care early can actually prolong survival alongside enhanced quality of life. This is probably because people eat better, can exercise more, and aren't enduring as much aggressive chemotherapy or radiation.

Yet health professionals and patients resist referral because of the assumption that it means the end. But it doesn't have to.

A study in Victoria examined the pattern of referral to palliative care and how it correlated with people's symptoms and quality of life. The findings were stark: while 72% of people with terminal cancer received palliative care, only a third received it for three months or more before they died. Shockingly, most only accessed palliative care in the last day or two of their lives.

Those who received early palliative care were 25% less likely to need an emergency department visit in the last month of life, 30% less likely to require a long hospital stay, and 2.5 times more likely to die in a place of their choosing – rather than in an emergency situation or acute hospital bed.

Cancer is far from the only reason people need palliative care, but the criterion that many palliative care specialists suggest for referral is this: **would it be a surprise if this person died in the next 12 months?** If the answer is no, then they are likely to benefit from the quality of life that palliative care can offer.

Sunscreen safety questions answered

When CHOICE tested 20 sunscreens and found that 16 failed to live up to the SPF claims on the label, the headlines created understandable confusion. Most of the worst offenders were either recalled or removed from shelves. But the coverage left Australians confused about sunscreens in general.

So, let's clarify a few issues.

Firstly, the UVA and UVB rays from the sun both damage skin. UVB causes sunburn and UVA gets under the skin, accelerating aging and contributing to skin cancer. So, ideally you want a broad-spectrum sunscreen which protects against both.

SPF (sun protection factor) is a measure of how much longer skin can be exposed to the sun before burning. SPF 50 means it's 50 times longer than unprotected skin – but staying out for too long without slapping it on again will still result in burns. Even high SPF sunscreen will still allow around 2% of the UV rays to get through, which is why comprehensive sun protection also includes covering up, broad brimmed hats and shade.

Going back to the CHOICE research, most of the 'failed' sunscreens were still over SPF 20, which Queensland research has shown that SPF 15 is the minimum for effective skin cancer protection. So, anyone inadvertently using one of those products will have received some protection.

Then there's the issue of safety, because we do absorb some of the sunscreen. However, safety margins are large. Testing assumes daily full-body application year-round, a scenario applicable only to outdoor workers or farmers, not most people.

Two ingredients have been of concern: homosalate and oxybenzone, both have been implicated for hormones disruption and environmental effects. Current formulations should contain these compounds at concentrations well below safety thresholds. Those concerned about these ingredients can check product labels or choose mineral-based alternatives containing zinc oxide or titanium dioxide.

Recommendations:

- Check use-by dates: expired sunscreen loses effectiveness
- Apply liberally: most people use only 25-50% of the recommended amount
- Reapply every two hours, and after swimming or sweating
- Choose reputable brands from established manufacturers
- Combine with other sun-protective behaviours

The bottom line is, not to let the CHOICE findings discourage sunscreen use. Sunscreen remains a critical component of skin cancer prevention. The message is: choose quality products, apply generously and frequently, and use sunscreen as part of comprehensive sun protection – not as a substitute for shade and protective clothing.

Paracetamol Safety in Pregnancy: The Evidence

You might recall the infamous press conference in September 2025 where President Trump and his health secretary, Robert F Kennedy Jr, claimed there was a crisis in autism spectrum disorder and blamed paracetamol use during pregnancy. President Trump even told women that if they were sick in pregnancy they should just “tough it out”.

Both allegations were swiftly debunked by scientific evidence.

There is no crisis in autism spectrum disorder diagnoses. The incidence has increased slightly to around 3% of births, but this is primarily due to changes in criteria for diagnosis. These diagnostic changes have actually been beneficial, allowing parents to better recognise when their child might be on the spectrum and seek support earlier.

The largest ever study on paracetamol and pregnancy followed 2.4 million Swedish children for 26 years.

Of these, 186,000 had been exposed to paracetamol during pregnancy. Crucially, researchers compared siblings – one exposed to paracetamol during pregnancy, and one not – which allowed factors like genetics and home environment to be taken into account.

The result was no increased risk of autism.

In January 2025, the Lancet published a comprehensive review of 43 studies using the same sibling comparison – where one had been exposed to paracetamol during pregnancy and the other hadn't. The researchers found no meaningful link with autism spectrum disorder, ADHD, or intellectual disability.

What we know definitively is that maternal fever and infection during pregnancy can have real risks for the baby. Paracetamol is the recommended first treatment to control the fever because it's safe and effective. This is also why COVID-19 and influenza immunisations during pregnancy are strongly recommended, preventing infection protects both mother and baby.