Right on Time: A Guide to Starting Palliative Care in Cancer Patients

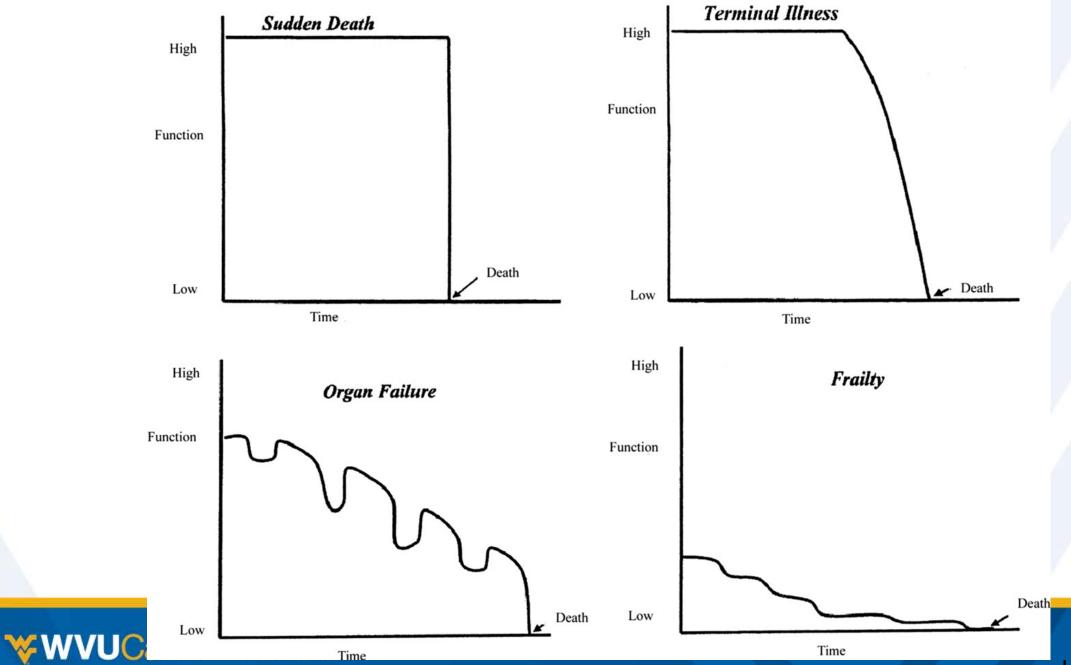
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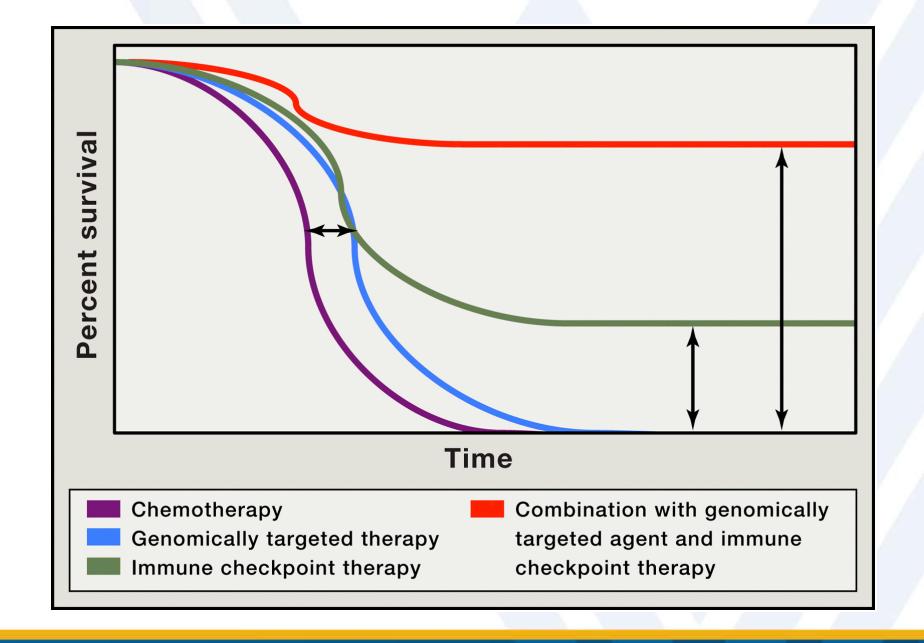


Objectives

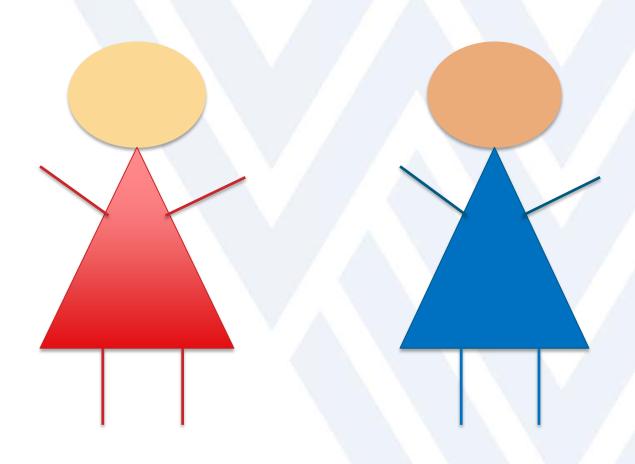
- Explore the barriers to palliative care involvement
- Discuss the current evidence on palliative care involvement
- Correlate aggressive symptom management and mortality

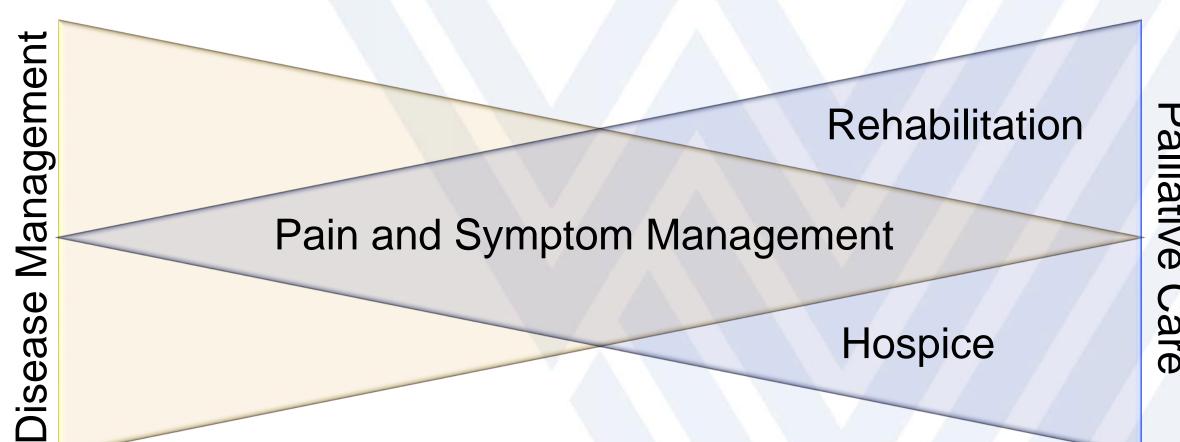


Lunney JR 2002



Tale of Two Patients





Palliative Care and Mortality

In patients with life-limiting illnesses, is there a difference in mortality between those receiving standard of care and those receiving palliative care?

- A) Yes, standard of care pts live longer
- B) Yes, palliative care pts live longer
- C) No, there's no difference in mortality
- D) Unsure (there's no evidence)



Early Palliative Care: The Evidence

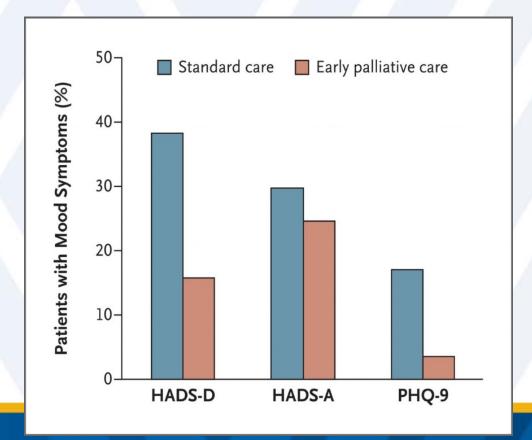
107/151 patients with newly diagnosed NSCLC randomized with

baseline & 12 week assessments

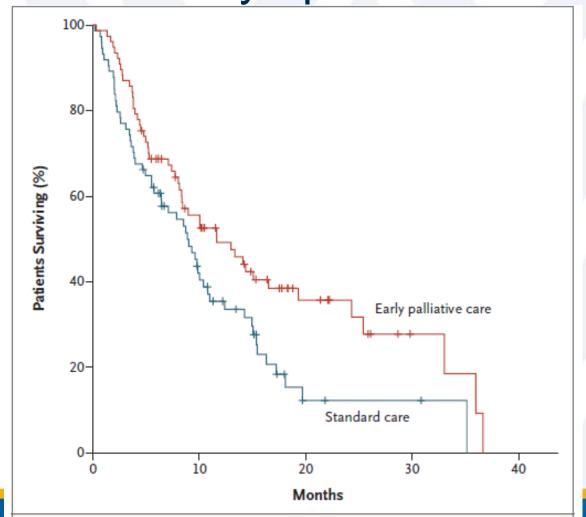
- FACT-L
- Mood Assessment

Primary Outcome:

 Change in anxiety
 and depression at 12
 weeks

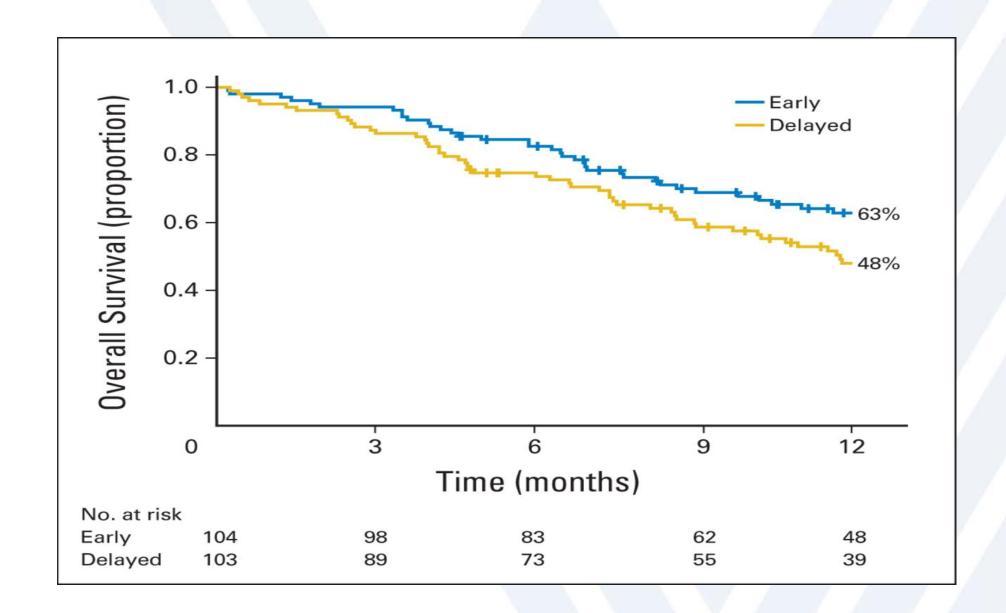


Palliative care extends survival and decreases symptom burden



Early Versus Delayed Initiation of Concurrent Palliative Oncology Care: Patient Outcomes in the ENABLE III Randomized Controlled Trial

Marie A. Bakitas, Tor D. Tosteson, Zhigang Li, Kathleen D. Lyons, Jay G. Hull, Zhongze Li, J. Nicholas Dionne-Odom, Jennifer Frost, Konstantin H. Dragnev, Mark T. Hegel, Andres Azuero, and Tim A. Ahles



		arly Group ents, n = 50)*		ayed Group ents, n = 59)*			
Resource	Rate 95% CI		Rate	95% CI	Relative Rate†	95% CI	P
Hospital days							
Baseline (total sample)	0.69	0.4 to 1.19	1 20	0.97 to 1.97	0.5	0.26 to 0.94	.03
Total use	0.95	0.61 to 1.46	1.3	0.91 to 1.86	0.73	0.41 to 1.27	.26
ICU days							
Baseline (total sample)	0.52	0.28 to 0.95	0.22	0.1 to 0.5	2.32	0.85 to 6.37	.10
Total use	0.1	0.04 to 0.24	0.15	0.07 to 0.3	0.68	0.23 to 2.02	.49
ED visits							
Baseline (total sample)	0.16	0.1 to 0.25	0.21	0.15 to 0.31	0.75	0.41 to 1.34	.32
Total use	0.14	0.09 to 0.2	0.19	0.14 to 0.26	0.73	0.45 to 1.19	.21
Chemotherapy in last 2 weeks of life	0.08	0.03 to 0.2	0.05	0.02 to 0.15	1.57	0.37 to 6.7	.54
Hospice use	0.68	0.55 to 0.84	0.63	0.51 to 0.78	1.08	0.8 to 1.45	.62

Abbreviations: ED, emergency department; ICU, intensive care unit.

^{*}Mean months from enrollment to death among decedents: early, 9.53 (standard deviation, 7.24); delayed, 7.82 (standard deviation, 6.25). †Delayed group as reference.



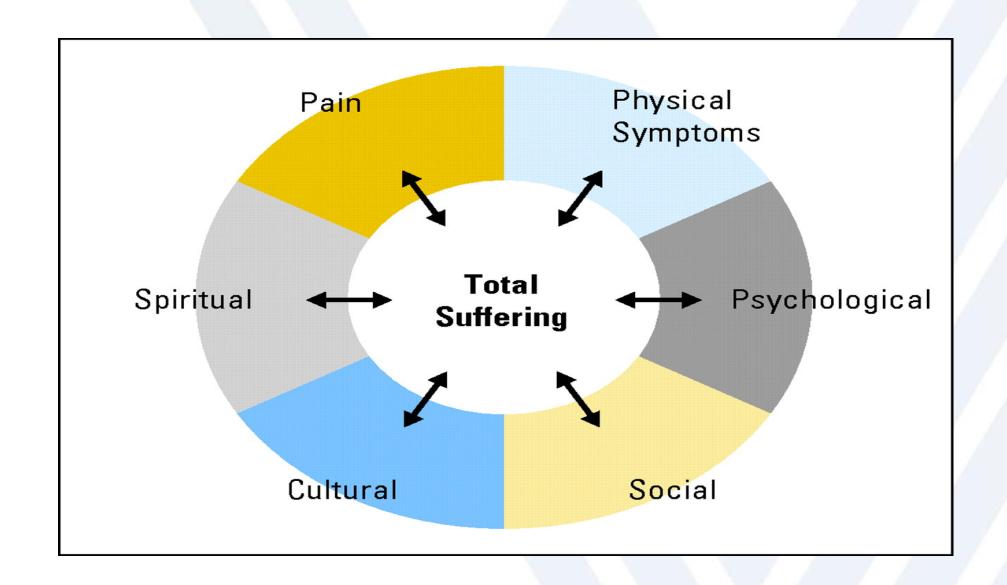


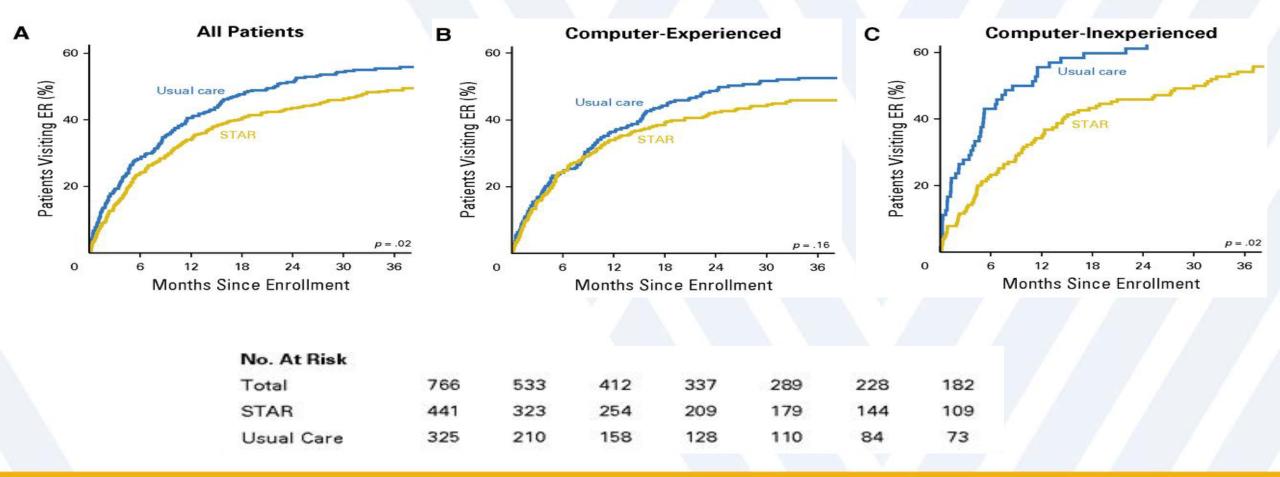
Table 1. Adolescents and Young Adults in Palliative Care: Clinical Domains Clinical Domain Physiologic Adult Healthy organs Sexuality and fertility Pharmacologic Pharmacodynamics Illicit drug use Opioiphobia Physical Tumor symptoms Treatment adverse effects Survivorship Psychological Compliance Fear of death Loneliness Independence Regression Guilt Depression Sociologic Parents Ethical unit Family v individual Decision making and truth telling Support outside hospital Family or friend; partners and peers A wish to die at home Hospital-in-the-home service Home in the hospital Computers, music machines, DVD players

Edmonton Symptom Assessment System: Numerical Scale Regional Palliative Care Program

Please circle the I	num	ber th	nat be	est de	escrit	es:						*
No pain	0	1	2	3	4	5	6	7	8	9	10	Worst possible pain
Not tired	0	1	2	3	4	5	6	7	8	9	10	Worst possible tiredness
Not nauseated	0	1	2	3	4	5	6	7	8	9	10	Worst possible nausea
Not depressed	0	1	2	3	4	5	6	7	8	9	10	Worst possible depression
Not anxious	0	1	2	3	4	5	6	7	8	9	10	Worst possible anxiety
Not drowsy	0	1	2	3	4	5	6	7	8	9	10	Worst possible drowsiness
Best appetite	0	1	2	3	4	5	6	7	8	9	10	Worst possible appetite
Best feeling of wellbeing	0	1	2	3	4	5	6	7	8	9	10	Worst possible feeling of wellbeing
No shortness of breath	0	1	2	3	4	5	6	7	8	9	10	Worst possible shortness of breath
Other problem	0	1	2	3	4	5	6	7	8	9	10	
Patient's Name Date	(C)	0	_	Time	197		30 30			-8		omplete by (check one) Patient Caregiver Caregiver assisted

Symptom Monitoring With Patient-Reported Outcomes During Routine Cancer Treatment: A Randomized Controlled Trial

Ethan Basch, Allison M. Deal, Mark G. Kris, Howard I. Scher, Clifford A. Hudis, Paul Sabbatini, Lauren Rogak, Antonia V. Bennett, Amylou C. Dueck, Thomas M. Atkinson, Joanne F. Chou, Dorothy Dulko, Laura Sit, Allison Barz, Paul Novotny, Michael Fruscione, Jeff A. Sloan, and Deborah Schrag



Take Home

- Barriers to palliative care are present and changing
- Palliative care decreases mortality
- Aggressive symptom management is quickly becoming standard of care



Questions?

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