

Expert Perspective from ASCO on Advanced Cancer Care Planning

A report from the Dartmouth Atlas Project released today concluded that one in three Medicare patients with advanced cancer spend their final days in the hospital and intensive care units. In these settings, patients can receive aggressive, even unwanted, cancer treatment that does not cure the cancer and lowers their quality of life. The study also found that fewer than half of these patients received hospice services, which addresses the physical, emotional, and spiritual needs of the person with cancer and their caregivers.

In this study, the researchers examined the hospitalization and treatment records of more than 235,000 Medicare patients throughout the United States. All of the patients were age 65 or older with advanced cancer who died between 2003 and 2007. The Dartmouth Atlas Project is run by the Dartmouth Institute for Health Policy and Clinical Practice and is funded by the Robert Wood Johnson Foundation.

What This Means for Patients

Advanced cancer is cancer that cannot be cured. After a diagnosis of advanced cancer, it is important to talk with your doctor and family members about your prognosis (chance of recovery) and choices for treatment, and to revisit these choices when circumstances change. Patients can receive treatment to help manage pain and other symptoms along with cancer therapy, and they need to share this preference with the cancer care team. Finally, as difficult as conversations about death and dying are, patients and caregivers should discuss what a good quality of life means and be open to investigating hospice and home care options.

“While saving lives is the oncologist’s goal, helping individuals live their final days in comfort and dignity is one of the most valuable and important responsibilities of our profession,” said George W. Sledge, Jr., MD, President of the American Society of Clinical Oncology. “Options to enhance a patient’s quality of life should be discussed throughout the course of their treatment. It is critical that we increase medical training in end-of-life patient communication and planning, and that Medicare and other insurers cover the costs of these essential conversations.”

What to Ask Your Doctor

- What is the diagnosis? What does this mean?
- Is this cancer curable? If not, what does that mean?
- What is my prognosis?
- What are my treatment options?
- What is the goal of this treatment? Is it directly treating the cancer or improving my symptoms, or both?
- How will we know whether the treatment is working? Will it help me live longer?
- Am I healthy enough to undergo this treatment?
- What are the benefits of this treatment?
- What the risks of this treatment?
- How can you help manage my pain and other symptoms?
- What financial costs are related to this treatment?
- Are there other alternatives I should consider?
- Where can I get support for me and my family?

Resources and Links

[Advanced Cancer Care Planning](#) [1]

[Palliative Care](#) [2]

[Podcast: Explaining Palliative Care](#) [3]

[Hospice Care](#) [4]

[Home Care](#) [5]

[Cancer Advances: Where Cancer Patients Die Affects Their Quality of Life, Caregivers' Mental Health](#) [6]

Links:

[1] <http://www.cancer.net/node/25113>

- [2] <http://www.cancer.net/node/25282>
- [3] http://www.cancer.net/sites/cancer.net/files/Explaining_Palliative_Care.mp3
- [4] <http://www.cancer.net/node/25274>
- [5] <http://www.cancer.net/node/25023>
- [6] <http://www.cancer.net/node/24453>