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A Team Approach to End-of-Life Care Discussions Lowers Intensive Care Use

A new study showed that discussing end-of-life care decisions with a team of doctors experienced in pain management and palliative care may lower intensive care use when patients with advanced cancer (cancer that is not curable) are in the hospital. Palliative care is treatment that focuses on reducing a patient's symptoms (such as pain), improving quality of life, and supporting patients and their families. People with cancer often receive treatment to eliminate the cancer and treatment to ease symptoms at the same time. However, recovery from cancer is not always possible. For people diagnosed with advanced cancer, the time will come when the treatment changes from a focus on curing the cancer to primarily palliative care, often called end-of-life care.

This study included a range of specialists who were part of the Duffey Pain and Palliative team of the Sidney Kimmel Comprehensive Cancer Center at Johns Hopkins University. The team of two nurses, a social worker, a palliative care doctor, a pharmacist, a nutritionist, and a chaplain help manage a patient?s symptoms and provide emotional support for patients before, during, and after hospitalization.

In the first four years after the pain and palliative care team began, researchers found that the number of patients who chose palliative care and declined to have any lifesaving measures slowly increased, from 81% to 95%. While the number of patients who received care in the intensive care unit (ICU) during their last hospitalization did not change, the number of patients who received mechanical ventilation (use of a machine to help a person breathe) for more than 14 days decreased from 10% to 5%.

What this means for patients

Discussing an advanced cancer diagnosis and end-of-life care is difficult for many people. However, it is important to have open and honest conversations with your health care team to express your feelings, preferences, and concerns. ?The multidisciplinary team?s goal is to support patients and families to relieve suffering, while still working as hard as ever to help patients maximize the length and quality of their lives. A better understanding of the benefits and limitations of intensive care in such situations seems to steer more patients towards choosing palliative care and withdrawal from ICU support,? said lead author Allen Ray Sing Chen, MD, PhD, MHS, Associate Professor of Oncology and Pediatrics at Johns Hopkins University in Baltimore, Maryland, and 1993 Conquer Cancer Foundation of ASCO Young Investigator Award recipient.

Questions to Ask Your Doctor

- What is my diagnosis? What does this mean?
- What is my chance of recovery?
- What is the goal of treatment? Is it directly treating the cancer or improving symptoms, or both?
- If I experience symptoms from cancer or the treatment, how will they be managed?
- Can you explain palliative care and end-of-life care to me?
- Where can I find support for me and my family?

For More Information

Advanced Cancer Care Planning [1] [2]

Palliative Care [3]

End-of-Life Care [4]

Links:
[1] http://www.cancer.net/node/25113
[2] http://www.cancer.net/all-about-cancer/treating-cancer/palliative-care
[3] http://www.cancer.net/node/25282
[4] http://www.cancer.net/node/25110