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## **Required Palliative Care Discussions can Lead to Improved Quality of Life for Patients and Caregivers** [1]

*Quality Care Symposium*  
*October 29, 2013*

As part of a recent initiative, Mount Sinai Hospital created standardized criteria for identifying patients who are most likely to benefit from a discussion of palliative care options. Palliative care is intended to ease a patient's symptoms and side effects, as well as support a patient's physical, emotional, and social needs.

The criteria developed by Mount Sinai Hospital were based on a review of the current research in palliative care, as well as discussions with oncologists and palliative care doctors about which patients benefit the most from discussions about palliative care. According to these newly developed criteria, doctors should discuss palliative care options with patients who have stage IV tumors and stage III pancreatic or lung cancer, and those who have had to stay in the hospital within the past month, have had to stay in the hospital for a long time, and who have uncontrolled symptoms, such as pain, nausea, shortness of breath, delirium, and emotional distress.

For this study, the researchers and staff at Mount Sinai Hospital used these criteria they developed to determine whether they should discuss palliative care options with 68 patients who needed to stay in the hospital within a three-month period. The information from these patients was compared with information from 51 patients who met the criteria in the six weeks before the researchers started using these criteria to guide palliative care discussions.

The researchers found that the percentage of palliative care discussions increased from 41% to 82% after these specific criteria were used. They also found that after these discussions, more patients used hospice care (14% compared with 25%) and fewer patients needed to be readmitted to the hospital (36% compared with 17%).

### **What this means for patients**

Palliative care can help a person at any stage of illness and is often given along with cancer treatment. However, for some people, there is a point when the available treatments cannot control the growth and spread of the cancer. Then, the main focus of treatment is on managing

the symptoms of the cancer. It is important to remember that this is very specific to the type of cancer you have and your specific situation, so consider having open and honest conversations with your doctor and health care team about your prognosis (chance of recovery) and the goals of your care.

### **Questions to Ask Your Doctor**

- What type and stage of cancer do I have? What does this mean?
- What is the goal of treatment? Is it directly treating the cancer or improving my symptoms, or both?
- How can you help me control my symptoms and maintain my quality of life?

### **For More Information**

[Advanced Cancer Care Planning \[2\]](#)

[End-of-life Care \[3\]](#)

[Cancer-Directed Treatments at the End of Life \[4\]](#)

[ASCO Recommends Palliative Care as a Part of Cancer Treatment \[5\]](#)

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#### **Links:**

[1] <http://www.cancer.net/required-palliative-care-discussions-can-lead-improved-quality-life-patients-and-caregivers>

[2] <http://dev-cancernet.asco.org/node/25113>

[3] <http://dev-cancernet.asco.org/node/25110>

[4] <http://dev-cancernet.asco.org/node/26101>

[5] <http://dev-cancernet.asco.org/node/24401>