The characteristics of family members about utilization of hospice palliative care in terminal cancer patients

The Catholic University of Korea, St. Paul`s Hospital

Sun-Wook Hwang, MD, PhD.

Introduction

Cancer patients are increasing nowadays and almost 1/4 of people are dying because of cancer in Korea, so hospice units and hospice utilization are increasing, and family members are important to decide admission to hospice palliative unit but there are few studies about family memer characteristics in hospice palliative unit utilization.

Objectives

To examine the characteristics of family structures of terminal cancer patients admitted to hospice palliative unit and determine family factors related to hospice utilization.

Method

We retrospectively analyzed the medical records of 134 terminal cancer patients from January 2012 and March 2016 at university Hospital hospice palliative center. We examined the patients' general and family characteristics. We calculated the interval between cancer diagnosis and hospice admission and its association with family members.

Results

Table 1. General characteristics of the study participants according to living with a spouse

Characteristics	living with a spouse (n=88)	living without a spouse (n=46)	p-value
Sex			<.001
male	60(68.2)	18(39.1)	
female	28(31.8)	28(60.9)	
Age(mean)*	62.9±12.8	66.9±14.9	0.11
ECOG†			0.77
1	3(3.4)	2(4.7)	
2	34(38.6)	13(30.2)	
3	45(51.1)	25(58.1)	
4	6(6.8)	3(7.0)	
NRS†			0.10
no	2(2.3)	4(9.1)	
mild	63(71.6)	26(59.1)	
moderate	17(19.3)	13(29.6)	
severe	6(6.8)	1(2.3)	
Comorbidity(yes)	53(62.4)	30(65.2)	0.75
Malignancy(high risk)	33(35.2)	18(30.4)	0.58
Metastasis(yes)	80(90.9)	42(91.3)	0.75
Standard treatment(yes)	68(77.3)	22(47.8)	<.001
Religion(yes)	70(82.4)	32(72.7)	0.20
Owner-occupier(yes)	63(78.8)	15(40.5)	<.001
Private insurance(yes)	60(75.0)	33(75.0)	1
Diagnosis to admission (month)‡	16(7-34)	7(3-17)	<.001
Admission to death(day)‡	19(9.5-29)	23(12-35)	0.24

*means±sd and t test
†fisher exact test
‡Median(IQR) and wilcoxon rank test

Table2. Association between Family structures and the time interval from cancer diagnosis to hospice admission and the time from hospice admission to death

	Admission to death(day)			Diagnosis to admission (month)		
	group 1 (n=70)	group 2 (n=69)	P*	group A (n=68)	group B (n=71)	P*
Marital status			0.81			0.04
never-marriage	1(1.5)	3(4.6)		1(1.52)	3(4.5)	
married	46(67.7)	41(63.1)		38(57.6)	49(73.1)	
divorced or separated	8(11.8)	8(12.3)		8(12.1)	8(11.9)	
widowed	13(19.1)	13(20.0)		19(28.8)	7(10.4)	
Living with a spouse			0.33			<.0001
no	21(30.9)	25(37.9)		31(47.0)	15(22.1)	
yes	47(69.1)	41(62.1)		35(53.03)	53(78.0)	
Number of offsprings			0.27			0.42
0	1(1.5)	3(4.6)		2(3.0)	2(3.0)	
1	27(39.7)	32(48.5)		26(38.8)	33(49.3)	
≥ 2	40(58.8)	31(47.0)		39(58.2)	32(47.8)	
Living without Offsprings	35(51.5)	36(55.4)	0.65	38(57.6)	33(49.3)	0.34
Sex of Offsprings living together						0.73
none	33(48.5)	28(43.1)		28(42.4)	33(49.3)	
male	24(35.3)	23(35.4)		26(39.4)	21(31.3)	
female	8(11.8)	6(9.2)		6(9.1)	8(12.0)	
male & female	3(4.4)	8(12.3)		6(9.1)	5(7.5)	
Number of family living together			0.94			0.61
1(alone)	12(17.4)	12(18.0)		14(20.9)	10(14.49)	
2-3	43(62.3)	43(64.2)		41(61.19)	45(65.22)	
≥ 4	14(20.3)	12(18.0)		12(17.91)	14(20.29)	
Informal caregivers			0.87			0.76
spouse	25(40.3)	28(43.1)		23(38.3)	30(44.8)	
children	25(40.3)	23(35.4)		24(40.0)	24(35.8)	
others	12(19.4)	14(21.5)		13(21.7)	13(19.4)	
Decision maker		0.89				0.04
spouse	28(45.2)	28(43.8)		22(37.3)	34(50.8)	
children	29(46.8)	32(50.0)		35(59.3)	32(38.8)	
others	5(8.7)	4(6.3)		2(3.4)	7(10.5)	

*chi-square or fisher exact test

Conclusion

In patients who admitted more than 13 months after diagnosis of cancer, there was a higher proportion of patients married and living with their spouses, And the presence of children and spouses is an important factor associated with hospice palliative care utilization in terminal cancer patients.