

Systemic Anticancer Therapy (SACT) In Patients Attending An Outpatient Palliative Care Clinic Before And During The Immunotherapy Era

Introduction

In randomized controlled trials, early palliative care (EPC) was associated with less Systemic Anticancer Therapy (SACT) in the last 30 days of life, an indicator of poor quality end-of-life care^{1,2,3}.

However, these studies were conducted before the widespread introduction of immunotherapy/targeted therapies (IO/TT).

Aim

To compare the proportion of patients attending an outpatient oncology palliative care clinic (OPCC) that received SACT in the last 30 days of life before and after the widespread introduction of IO/TT.

Methods

We retrospectively compared two cohorts attending the OPCC at the Princess Margaret Cancer Centre, Toronto, Canada. Cohort 1 consisted of patients seen initially between June-Dec 2006 (prior to IO/TT); Cohort 2 were seen between June-December 2018 (after IO/TT). We collected patient demographics; diagnosis; symptom scores; ECOG; and SACT information.

Jacqueline Alcalde Castro ¹, Ashley Pope ¹, Arun Ghoshal ¹, Alejandra Ruiz Buenrostro ¹, Lisa Le ¹, Breffni Hannon ¹, Deepa Wadhwa ², Camilla Zimmermann ¹

¹Department of Supportive Care, Princess Margaret Cancer Centre, University Health Network, Toronto, ON, Canada

²Division of Medical Oncology, Credit Valley Hospital, Trillium Health Partners, Mississauga, ON, Canada

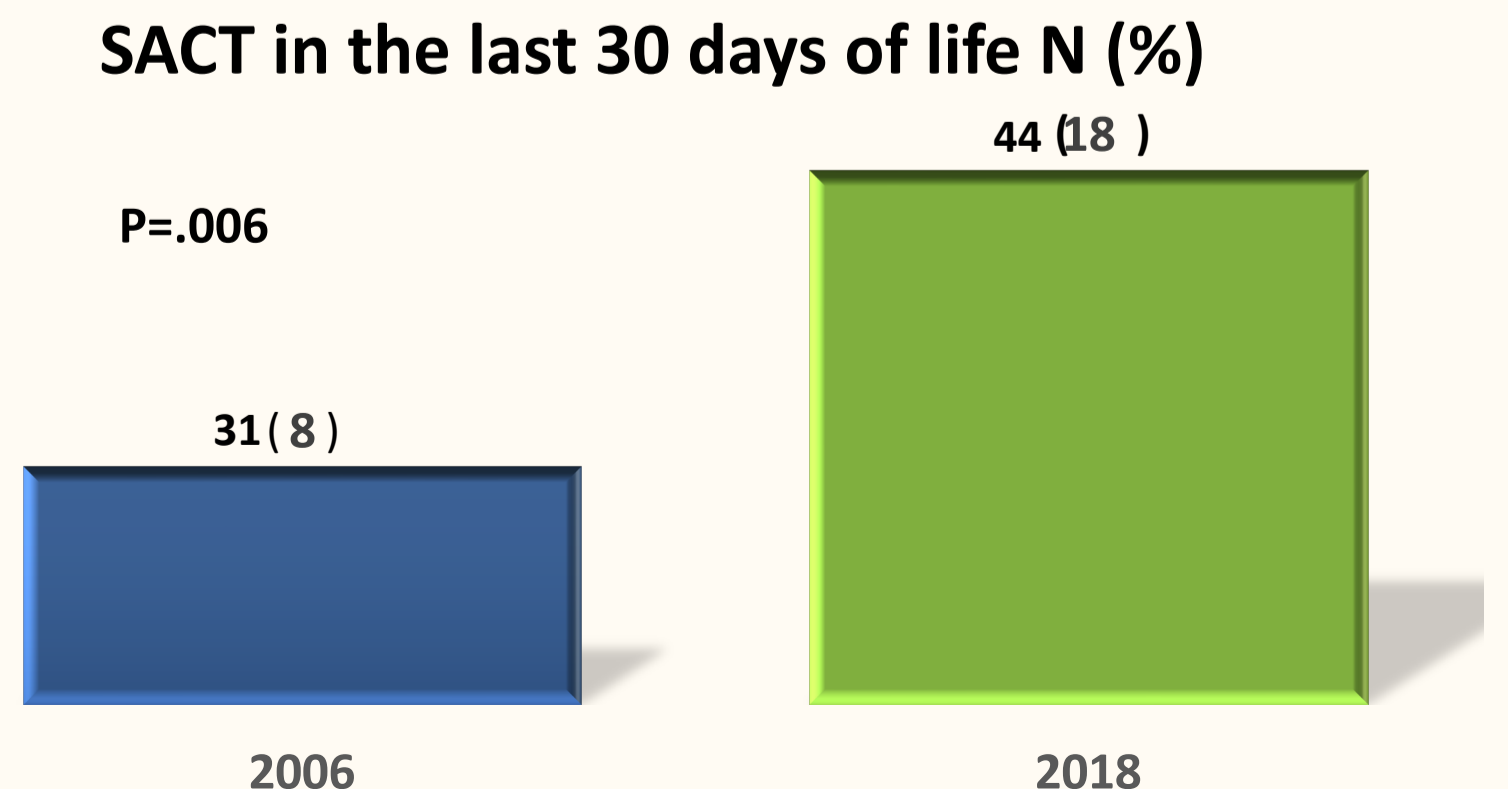
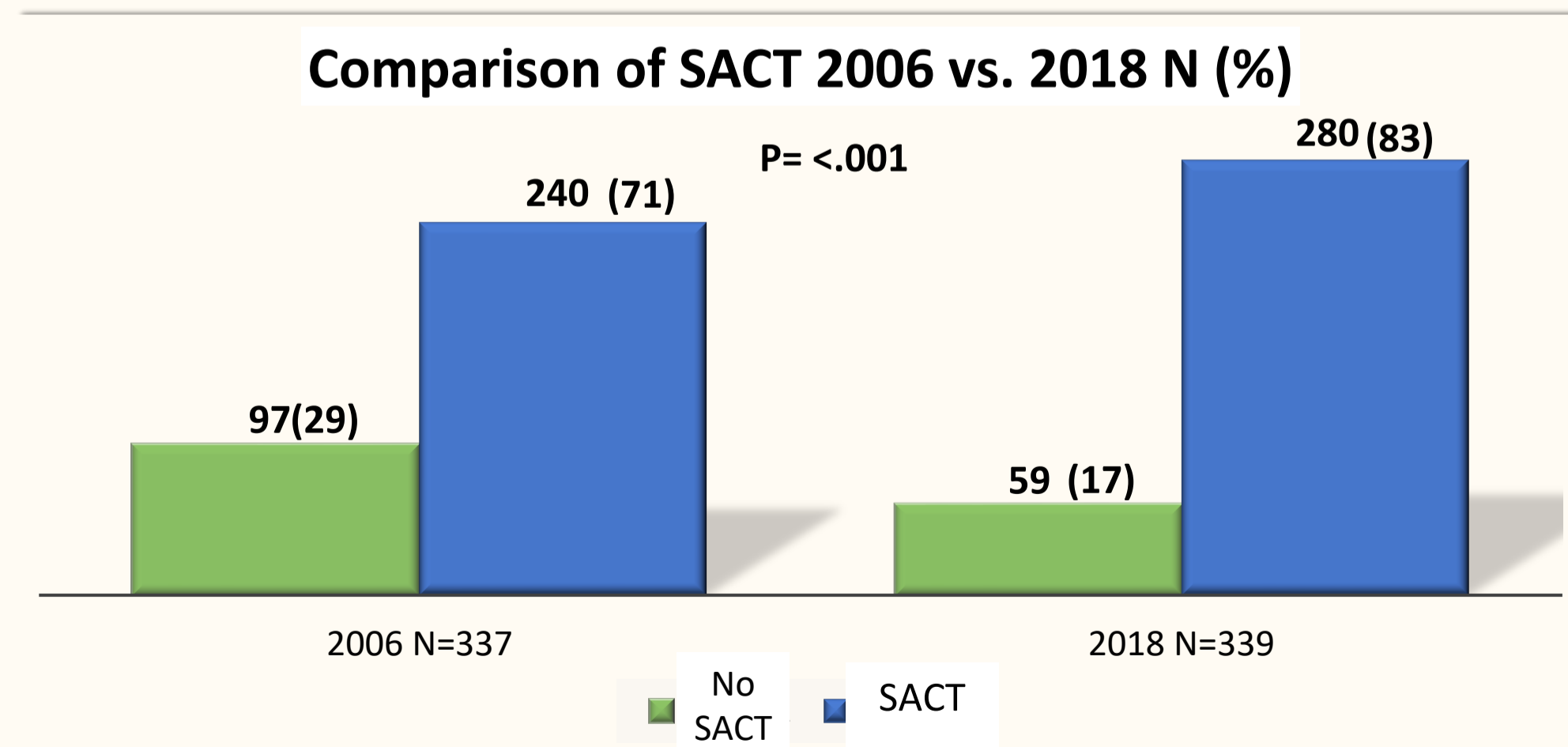
In the era of immunotherapy, there has been a substantial increase in receipt of SACT among patients receiving palliative care, including in the last 30 days of life.

Results

Compared to Cohort 1 (n=337), fewer patients in Cohort 2 (n=339) received no SACT (97/337 (29%) vs 59/339 (17%), $p < .001$); fewer received SACT only before the first OPCC visit (126/337 (37%) vs 93/339 (28%), $p = .006$), and more continued to receive SACT after this visit (114/337 (34%) vs 187/339 (55%), $p < .001$). Of those with a known date of death (n=239), 44 (18%) patients in Cohort 2 had SACT in the last 30 days of life, compared to 35/337 (8%) in Cohort 1 ($p = .006$).

Type of SACT in the last 30 days of life		
	2006 (N=31)	2018 (N=44)
Chemotherapy	17	23
Hormonal therapy	6	2
Targeted therapy	6	12
Immunotherapy	2	7

Patient demographics		
	2006 (N=337)	2018 (N=339)
Sex		
Female	163	168
Male	174	171
Age in years		
Median (range)	66 (20-92)	67 (25-95)
Referring service		
Hematology	17	12
Medical oncology	206	257
Radiation oncology	80	39
Surgical oncology	25	16
Other/Unknown	9	15



Corresponding author: Dr. Camilla Zimmermann
Contact: Camilla.Zimmermann@uhn.ca