



# The impact of palliative care consultation on reducing chemotherapy, targeted therapy and immunotherapy in hospitalized cancer patients in the Last 30 Days of Life



Nintita Sripaiboonkij Thokanit<sup>1</sup>, Viji Kasemsup<sup>2</sup>, Ekaphop Sirachainan<sup>3</sup>, Siriporn Semsarn<sup>4</sup>, Tanin Tiyanont<sup>3</sup>, Pongsathorn Piebpien<sup>5</sup>, Phichai Chansriwong<sup>3</sup>

<sup>1</sup> Ramathibodi Comprehensive Cancer Center, <sup>2</sup> Department of Community Medicine, <sup>3</sup> Department of Medicine, <sup>4</sup> Ramathibodi Palliative Care Excellence Center, <sup>5</sup> Information Technology Department.

Faculty of Medicine Ramathibodi Hospital, Mahidol University

## Background

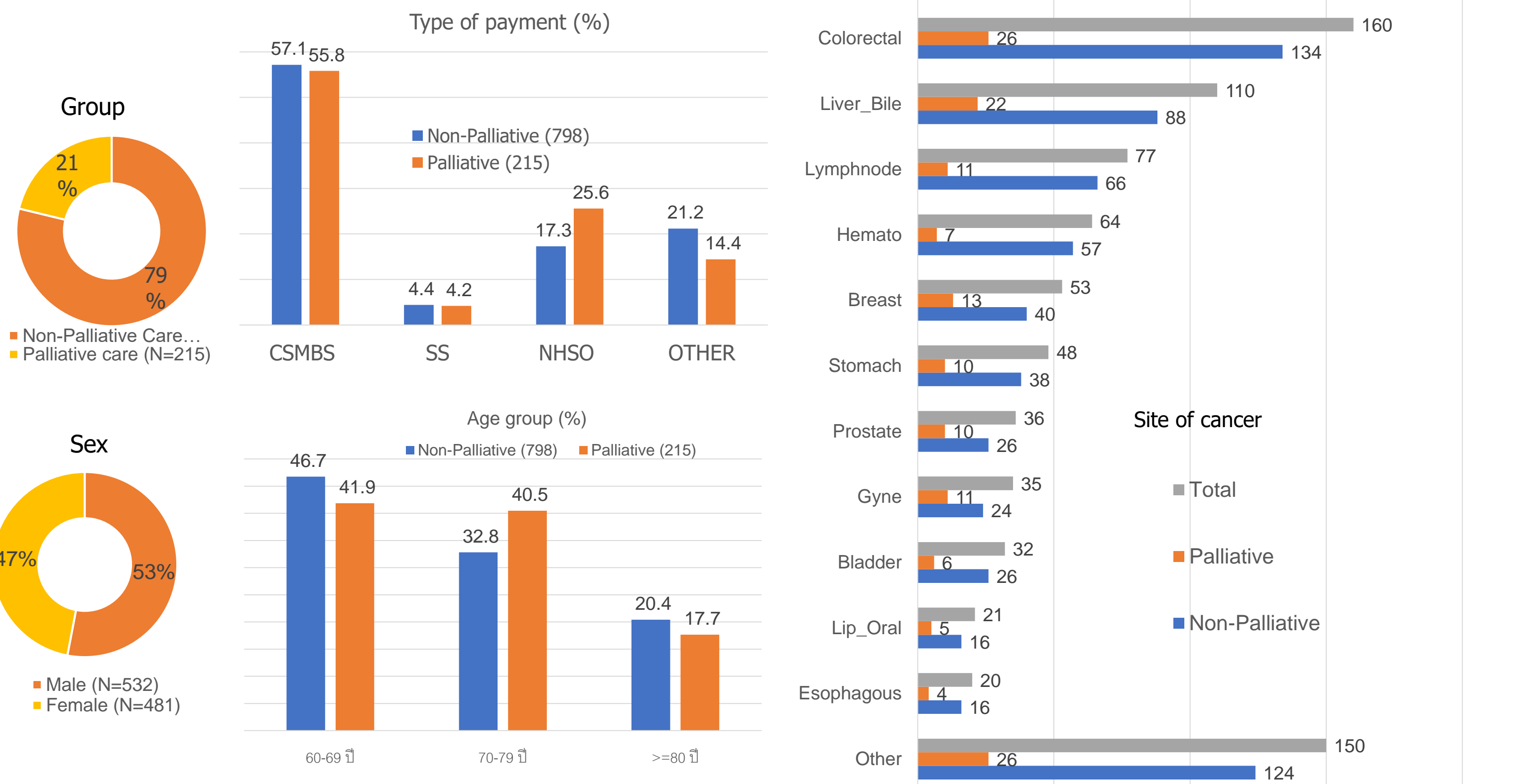
Chemotherapy is aggressive treatment near the end of life. In the present, the targeted therapy and immunotherapy increasingly prescribed as chemotherapy at the end of life, but stills no guidelines on appropriately timed cessation of the cancer treatments in the end-of-life care. We evaluated the impact of palliative care consultation on cancer systemic treatments use.

## Methods

We analyzed a retrospective Ramathibodi Hospital database that included elderly cancer patients had a medical claim for death between Jan 1, 2016 - Dec 31, 2020. Our study identified elderly patients with metastatic solid cancer who died at a Ramathibodi Hospital, explored chemotherapy, targeted therapy, and immunotherapy in the last 30 days of life. We divided patients into palliative and non-palliative care consultation groups. Outcomes included any cancer treatments receipt in during last 30 days of life and cancer treatments in the last days of life.

## Results

Among 1,013 patients analyzed, 433 (42.7%) received cancer treatments in the last 30 days of life. The proportion of patients receiving one of chemotherapy, targeted therapy, or immunotherapy in the last 30 days of life was significantly lower in palliative care consultation groups ( $P < 0.0001$ ), especially in receiving chemotherapy treatment ( $P = 0.0001$ ). There were fewer patients had treatment with targeted therapy or immunotherapy in patients who had integrated palliative care, however, no significant difference ( $P = 0.062$  and  $P = 0.749$ , in respectively). Patients in CSMBS and UCS health scheme had a significantly lower in cancer treatment when they received PC consultation,  $P = 0.001$ .



## Conclusions

A quarter of elderly cancer patients received their palliative cancer treatments in a last month before death, majority treated with chemotherapy, and an increasing number of targeted therapy and immunotherapy. Integrated palliative care in caring elderly cancer patients associate with significantly lower cancer treatments in the last 30 days of life, especially in chemotherapy treatments.

Variables	Palliative	Non-Palliative	Total	P-value
<b>Immunotherapy</b>				<b>&lt;0.749</b>
No	280	923	1,203	
Yes	12	44	56	
<b>Targeted therapy</b>				<b>0.062</b>
No	280	923	1,203	
Yes	2	24	26	
<b>Chemotherapy</b>				<b>&lt;0.001</b>
No	280	923	1,203	
Yes	36	274	310	

## Acknowledgments

- Foundation of Thai Gerontology Research and development
- Institute
- Ramathibodi Comprehensive Excellent Cancer Center
- Ramathibodi Palliative care Excellent Center