

The use of Palliative Performance Scale as the Sole Prognostication Tool among Patients Transferred Under Palliative Care: A Single Institution's Experience in Qatar

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Method

This is a retrospective cohort study. Data of advanced cancer patients who were accepted under palliative care program were retrieved from Cerner (electronic medical record) from 1st January 2017 till 31st December 2021 to test the accuracy of PPS in estimating the prognosis and survival time. The scores of PPS were compared with the date of death for each patient alongside.

Results

The findings revealed that the initial PPS is a significant predictor for the overall survival along with the type of cancer, but not with age or gender. To remove the tail effects that found in the study, participants were grouped into those with PPS $\leq 30\%$ and those patients with PPS from 40% to 80%. The results revealed a statistically significant higher OS for patients with PPS 40% to 80% compared to those $\leq 30\%$ ($p= 0.03$).

PPS Level	Ambulation	Activity & Evidence of Disease	Self-Care	Intake	Conscious Level
100%	Full	Normal activity & work No evidence of disease	Full	Normal	Full
90%	Full	Normal activity & work Some evidence of disease	Full	Normal	Full
80%	Full	Normal activity with Effort Some evidence of disease	Full	Normal or reduced	Full
70%	Reduced	Normal or reduced Some evidence of disease	Full	Normal or reduced	Full
60%	Reduced	Unable Normal Job/Work Significant disease	Occasional assistance necessary	Normal or reduced	Full or Confusion
50%	Mainly Sit/Lie	Unable Normal Job/Work Significant disease	Considerable assistance required	Normal or reduced	Full or Confusion
40%	Mainly in Bed	Unable hobby/house work Significant disease	Mainly assistance	Normal or reduced	Full or Drowsy +/-Confusion
30%	Totally Bed Bound	Unable to do any activity Extensive disease	Total Care	Normal or reduced	Full or Drowsy +/-Confusion
20%	Totally Bed Bound	Unable to do any activity Extensive disease	Total Care	Minimal to sips	Full or Drowsy +/-Confusion
10%	Totally Bed Bound	Unable to do any activity Extensive disease	Total Care	Mouth care only	Drowsy or Coma +/-Confusion
0%	Death	---	---	---	---

Figure 1. Palliative Performance Scale

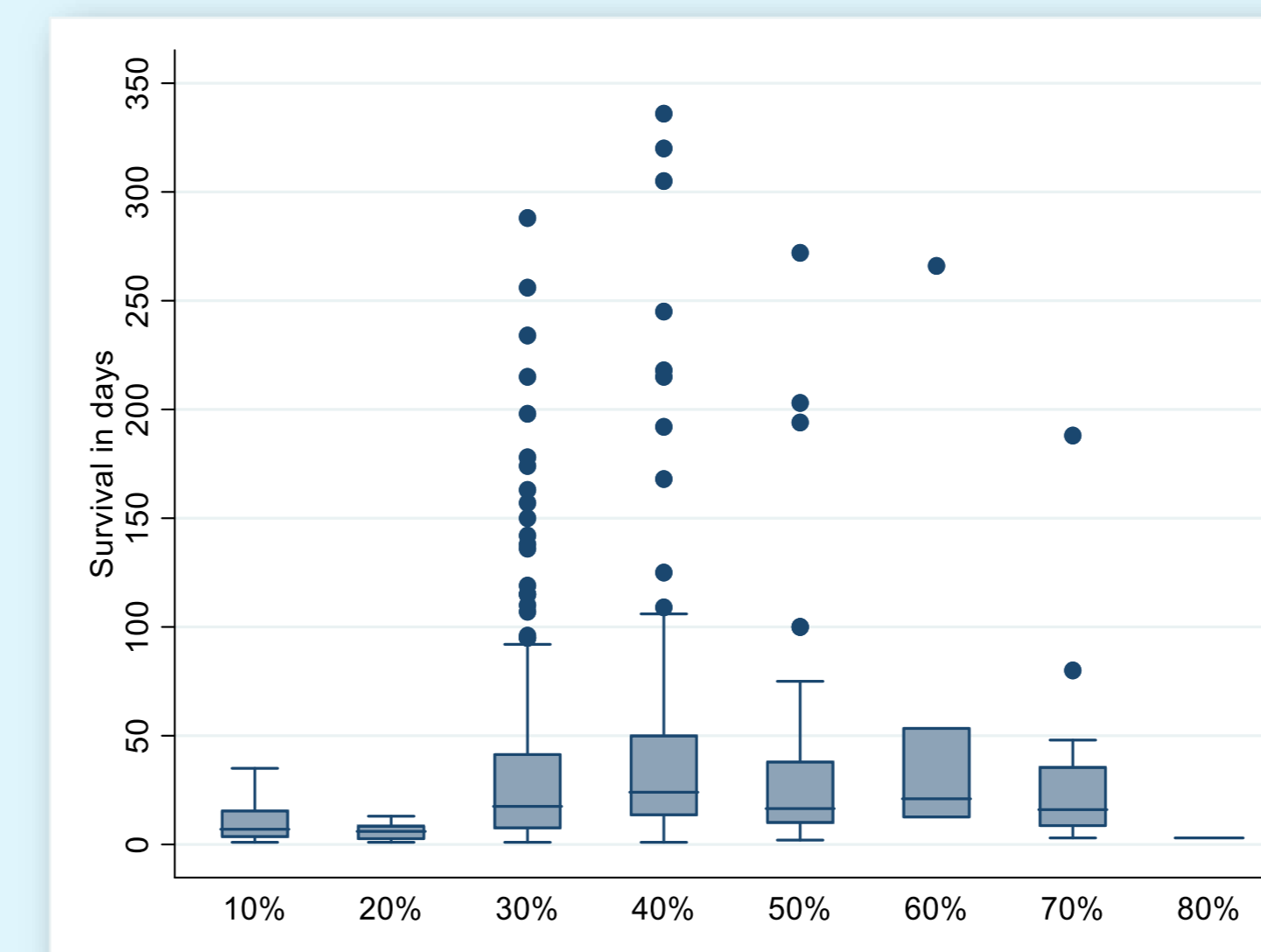


Figure 2. Initial PPS score and Survival time in days.

Introduction

The demand for cancer palliative care service in Qatar is increasing due to the increase of advanced cancer population who require supportive measures and end of life care. End of life prognostication is a vital step to determine the survival; however, this is extremely challenging, and requires precise tools besides clinicians' judgments. The palliative performance scale (PPS) tool is used to prognosticate survival and is used to assess patients 'symptoms in National Center of Cancer Care and Research (NCCCR).

Aim

To analyze the correlation between PPS and Overall Survival (OS). In addition, to report the experience of our center in using PPS as a sole prognostication tool among patients transferred under palliative care at NCCCR in Qatar

Conclusion

Accurate prognostication in palliative care cannot be achieved with the use of PPS as a sole prognostication tool, there is a need to couple it with other tools, such as clinical predictors of survival.



Figure.1 Getty Creative. Forbes Health (May, 2023). Retrieved from <https://www.forbes.com/health/healthy-aging/palliative-care-vs-hospice/>

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