# Characteristics of timely integration of palliative care into oncology hospital care for patients with incurable cancer: results of a Delphi Study









C. S. Heipon<sup>1</sup>, L. Brom<sup>1</sup>, Y. M. van der Linden<sup>2</sup>, D. Tange<sup>3</sup>, I. Dingemans<sup>3</sup>, A. K. L. Reyners<sup>4</sup>, N. J. H. Raijmakers<sup>1</sup>

Department of Research & Development, Netherlands Comprehensive Cancer Organization (IKNL), Utrecht, the Netherlands; Department of Radiotherapy, Leiden University Medical Centre, Leiden, the Netherlands; Dutch Federation of Cancer Patients Organisations, Utrecht, the Netherlands; 4 Department of Medical Oncology, University Medical Centre Groningen, University of Groningen, Groningen, the Netherlands

### What do we know?

- Timely palliative care (PC) has positive effects on quality of life, care satisfaction and decreases symptom burden in patients with incurable cancer
- There are different ways to integrate palliative care in a timely manner and hospitals focus on different elements

## Research questions

- How do hospitals with oncology care embed different elements of timely integration of PC in their daily clinical practice?
- What characteristics of these elements are considered essential for timely integration?

## 1. Identification of potential PC needs

- 2. Advance Care Planning (ACP)
- 3. Routine symptom monitoring
- 4. Involvement of the specialist palliative care team (SPCT)
- 1. For whom (for which patient groups is the element initated
- 2. When? (when in the disease trajectory is the element initiated?)
- 3. By whom? (which healthcare is responsible for initiating the element?

#### Want to know more? **Carly Heipon** c.heipon@iknl.nl



or scan:



## What did we do?

A modified Delphi study to identify elements of timely integration of PC in oncology hospital care

An expertpanel consisting of 83 experts (3 physicians, 40 nurses, 4 patient- and 2 relative representatives) from 21 Dutch hospitals

Three online questionnaires with statements on four elements and three characteristics of timely PC in oncology

## Results

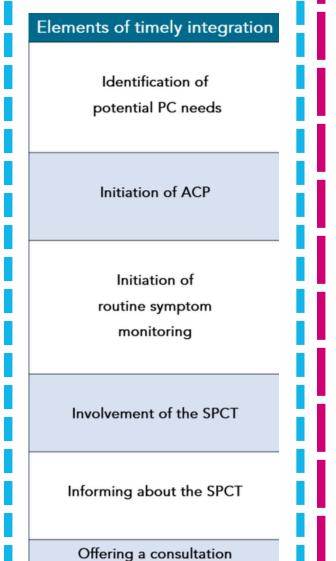
71 (78%) experts filled out the first questionnaire, 65 (71%) the second, and 49 (54%) the third.

- Healthcare professionals integrate PC by:
  - identifying potential PC needs in all patients with incurable cancer (66%), and/or when those patients have a poor performance status (66%), and/or suffer increased symptom burden (65%)
  - initiating ACP after diagnosis of incurable cancer (41%) or when patients have metastases (41%)
  - starting to monitor symptoms for all patients with incurable cancer (38%)
  - involving the SPCT when patients request their involvement (58%)

- The expertpanel agreed that:
  - Potential PC needs should be assessed for all patients with incurable cancer (97%)
  - thereafter ACP should be initiated and symptoms monitored (86%-91%)
  - the SPCT should be involved when patients request their involvement (86%) or when patients with PC needs have high symptom burden on multiple dimensions (76%)

#### **Table 1** Consensus (≥70%) on characteristics of timely integration of palliative care

For patients with.



with the SPCT

incurable cancer AND a poor performance status incurable cancer AND comorbidity suffer increased symptom burden identified PC needs have <u>a life expectancy of < 12 months</u> identified PC needs AND metastases suffer increased symptom burden - have a (possible) switch in line of therapy identified PC needs are diagnosed with incurable cancer identified PC needs AND metastases - suffer increased symptom burden Identified PC needs AND metastasis of a tumour which are unexpectedly admitted to the hospital - Have is a (possible) switch in line of therapy gives a life expectancy of < 12 months identified PC needs AND a poor performance status ask for their involvement suffer increased symptom burden on multiple dimensions (physical, psychological, social or spiritual) suffer increased symptom burden on multiple dimensions (physical, No consensus psychological, social or spiritual) - have a life expectancy of <3 months - have a life expectancy of <3 months

No consensus

## Conclusion



PC needs should be assessed for all patients with incurable cancer soon after diagnosis of incurable cancer



Future research on how to structurally integrate the assessment of potential PC needs, ACP and symptom management into oncology care is needed



More educational resources on PC for all HCPs are essential to enable them to provide generalist PC