

# Comparison of the end of life of cancer and noncancer patients in French overseas departments (FOD)

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### **BACKGROUND**

In France, overseas and mainland territories share the same legal framework and administration but cultural and socio-demographic differences including

- lower incomes
- higher share of complex households
- fewer specialist palliative care units

in French Overseas Departments (FOD) than in mainland France.

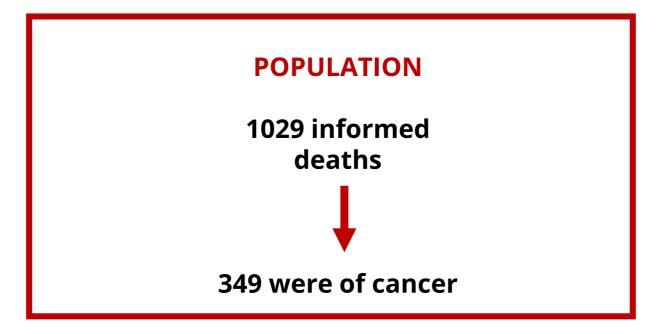
These disparities may modify end-of-life medical practices.

This research aims to describe end-of-life medical practices in these territories, comparing cancer and non cancer population.

### **METHODOLOGY**

Retrospective study of a random sample of adult patients who died between March 2020 and February 2021 conducted in four FOD: Guadeloupe, French Guiana, La Réunion, Martinique.(1)

Physicians who certified the deaths were asked to describe end-of-life care in a self-administered questionnaire.





# PHYSICIANS TREATING CANCER PATIENTS:

Better knowledge of cancer patient's end-oflife wishes :

- Preferred place of death (34.2% vs 18.1%)
- Advanced directives (4.5% vs 1.4%)

More training in palliative care (p=0.017)

- Trusted support person (54.0% vs 38.4%)



## **PATIENTS WITH CANCER:**

- Less often died in nursing home (p=0.006)
- Better cognitive performance (p<0.001)
- More capable of self-determination (22.9% vs 6.3%) by the time of the last decision
- Better access to palliative care teams (52.6% vs 12.9%).

### **DISCUSSION**

Cancer patients received better palliative care than non-cancer patients.

Their preferences regarding end-of-life and death were more often known by physicians and followed.

Other small and isolated territories like Trinidad and Tobago (2) showed similar results.

The relative predictable course of cancer may have helped identify palliative care needs in these patients compared to non-cancer patients with other types of chronic diseases.



### References:

(1) End-of-Life Surveys in the French Overseas Departments : Data Collection Protocol". Documents de travail, n°290, Aubervilliers : Ined. Sophie Pennec, Joëlle Gaymu, Efi Markou et al.. 2024

(2) Palliative and End-of-Life Care in a Small Caribbean Country: A Mortality Follow-back Study of Home Deaths. J Pain Symptom Manage. 2020 Dec;60(6):1170-1180. doi:

10.1016/j.jpainsymman.2020.06.029. Epub 2020 Jul 7. PMID: 32650139. Jennings N, Chambaere K, Chamely S, Macpherson CC, Deliens L, Cohen J.























