

Palliative Cancer Care Meta-Analysis

Hoerger et al. (2019). "Impact of interdisciplinary outpatient specialty palliative care on survival and quality of life in adults with advanced cancer: A meta-analysis of randomized controlled trials." *Annals of Behavioral Medicine*.

What is "Palliative Care"?

- Palliative care is care aimed at helping patients' quality of life, physically and mentally. It focuses on relieving symptoms, side effects, and the stress of illness.
- Palliative care is strongly recommended for people who have been diagnosed with a serious illness, such as advanced cancer.
- Many people are surprised to learn that palliative care is different from hospice, which is usually for people with less than six months to live. In contrast, palliative care is appropriate for patients at any stage of illness, even while patients are on treatment.

Who provides Palliative Care?

- All clinicians can help with quality of life, but this study looked at palliative care provided by specialists. Palliative care specialists have advanced knowledge, skills, and credentials in helping with symptoms, side effects, and the stress of illness. It is their main focus. Palliative care specialists are experts at managing difficult symptoms and side effects and helping patients cope with a serious illness. If patients want, they can also help with difficult treatment decisions, planning for the future, and other needs.

What is a "Meta-Analysis"?

- "Meta" is similar to "mega" or "big." A meta-analysis combines results from multiple studies. Sometimes different studies have different results, which can cause confusion. A meta-analysis combines results very carefully to provide a clear picture of what works. If multiple studies show the same thing, we can be confident in the conclusion.
- This meta-analysis combined the results from all studies comparing specialty palliative care versus usual care for patients with advanced cancer. All studies were randomized clinical trials, often considered a "gold standard." The researchers carefully considered the quality of each study, so that flawed studies did not lead to poor conclusions.

What did the study find?

- Patients who got palliative care were more likely to be alive at the 1-year follow-up. Only 42% of control patients were alive at 1 year, but 56% of patients receiving palliative care were alive. Control patients typically lived 10 months, but patients receiving palliative care lived 14 ½ months.
- Patients who got palliative care had better quality of life. They felt better physically and mentally.
- All results were based on at least 600 patients from at least 3 high-quality studies.
- The findings build on prior meta-analyses that did not study survival or only looked at short-term survival.

What does this mean for patients, families, and clinicians?

- Palliative care was found to help patients with advanced cancer live longer and experience better quality of life.
- Quality of life and survival are important to patients with advanced cancer and their families. This meta-analysis provides new evidence supporting the use of palliative care.