

Quality of Life Matters[®]

End-of-life care news & clinical findings for physicians

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Crisis in U.S. Cancer Care Demands Shift to Patient-Centered Care

End-of-life care must match patients' wishes, says Institute of Medicine

Urgent changes are needed in the way health care is delivered to cancer patients, warns a new report from the Institute of Medicine. In order to reform a system that is “in crisis,” the priority must be to engage patients in their treatment, with close attention paid to the needs of the growing number of elderly and advanced-disease patients.

According to the report, entitled “Delivering High-Quality Cancer Care: Charting a New Course for a System in Crisis,” an aging population, increasing complexity and cost of cancer care, and a shrinking oncology workforce are all contributing to the growing crisis. A committee of experts released the report in September 2013.

“Care often is not patient-centered, many

Strategies for Improving Delivery of Cancer Care

- Provide patients and their families with understandable information about cancer prognosis, treatment benefits and harms, palliative care, psychosocial support, and costs.
- Provide patients with end-of-life care that meets their needs, values, and preferences.
- Ensure coordinated and comprehensive patient-centered care, and that all individuals caring for cancer patients have appropriate core competencies.
- Expand the breadth of data collected in cancer research for older adults and patients with multiple comorbid conditions.

— Institute of Medicine, 2013

patients do not receive palliative care to manage their symptoms and side effects from treatment, and decisions about care often are not based on the latest scientific evidence,” the committee found.

The report outlines six components needed for the delivery of cancer care that is accessible, affordable, and evidence-based. Recommendations include strengthening clinicians’ core competencies in cancer care, shifting to team-based models of care, and communicating more effectively with patients. The report also recommends that clinicians be provided with tools and initiatives for incorporating new medical knowledge into routine clinical care.

Components of high-quality cancer care, in order of priority are:

- Engaged patients
- An adequately staffed, trained, and coordinated workforce
- Evidence-based care
- An information technology system
- Systematic translation of evidence into

clinical practice, with quality measurement and performance improvement

- Accessible, affordable care for all patients

END-OF-LIFE CARE

To more fully engage patients in their care, the committee recommends that patients and their families receive understandable information on prognosis, the benefits and harms of treatment in light of their treatment goals, the costs of care, and palliative and end-of-life care.

“Patients with advanced cancer should receive end-of-life care consistent with their needs, values, and preferences,” the report states. “This will require cancer care teams to revisit and implement patients’ advance care plans — which detail the type of care patients would want to receive if they become unable to speak for themselves — and to place a primary emphasis on palliative care, psychosocial support, and timely referral to hospice for end-of-life care.”

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