Palliative Oncology

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Palliative Oncology

- 50% of cancer patients will die of the disease
- Many patients are not routinely referred for Hospice care
- Palliative care needs to be integrated earlier into the continuum of cancer care
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- “End of life” care often fragmented leading to lack of continuity of care and impeding the ability to provide high quality, interdisciplinary care.

- Enhanced communication among patients, families and providers is crucial to high-quality end-of-life care.
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- Current Medicare hospice benefits limit the availability of the full range of interventions needed by many people at the "end of life".
NCCN Definition of Palliative Care

- Both a philosophy of care and an organized, highly structured system for delivering care to persons with life-threatening or debilitating illness.
- Patient- and family-centered care
- Goal is to prevent and relieve suffering and to support the best possible quality of life for patients and their families.
Palliative Definition Cont.

- Can be delivered concurrently with life-prolonging care or as the main focus of care.
NCCN Standards of Palliative Care

- Should be screened at initial visit, at appropriate intervals, and as clinically indicated.
- Should be informed that palliative care is integral part of comprehensive cancer care.
- Should be delivered based on clinical practice guidelines.
Educational programs should be provided to all healthcare professionals and trainees.

Appropriate reimbursement for palliative care.

Should be included in clinical health outcomes measurement.
Skilled palliative care specialists and interdisciplinary palliative care teams should be readily available to provide consult or direct care.

Should be monitored by institutional quality improvement programs.
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- Patient assessment – estimate of life expectancy
- Benefit and risks of anti-cancer therapy
- Clinical trials
- Complementary medicine
References

- Palliative Care. JCCN 2006; 4.
Cancer Center Perspectives

- Palliative Medicine/Supportive Oncology Programs
  1. Consultation
  2. Trained doctors
  3. Inpatient/outpatient service
  4. Multidisciplinary
  5. Training
  6. Research