

Review Article

A review on determinants and barriers affecting the transition from curative care to palliative care in patients suffering from terminal cancer

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ABSTRACT

The integration of palliative care into comprehensive cancer care has become increasingly recognized as an essential aspect of cancer treatment. Palliative care can improve patient outcomes, symptom management, and overall satisfaction with care. However, despite the benefits of palliative care, several barriers exist that prevent its widespread implementation, including lack of awareness and understanding of palliative care, lack of access to palliative care services, and stigma associated with palliative care. The decision to transition from curative to palliative care is complex and influenced by several factors, including patient preferences, disease stage, and prognosis, symptom burden, comorbidities, and social support. Effective communication between healthcare providers, patients, and families is essential in ensuring that patients are informed about their options and can make informed decisions about their care. This literature review aims to explore the factors that influence the decision to transition to palliative care and to identify the barriers to the implementation of palliative care in cancer patients. The review also discusses strategies to overcome these barriers and highlights the importance of integrating palliative care into cancer care from the time of cancer diagnosis.

Keywords: Palliative care, Curative care, Cancer

INTRODUCTION

Cancer is a devastating disease that affects millions of people worldwide.¹ While advancements in cancer treatment have improved survival rates, cancer can still cause significant physical, emotional, and social distress for patients and their families. Palliative care has emerged as a critical component of comprehensive cancer care, with the goal of improving the quality of life of patients with cancer and their families.²

This literature review explores the importance and benefits of integrating palliative care into comprehensive cancer care and provides evidence-based

recommendations for overcoming the barriers to integration. It discusses the limitations of curative care and the need for palliative care, the barriers to its implementation, and the evidence for its effectiveness.

The review emphasizes importance of transition from curative to palliative care and explores the different approaches to palliative care and factors that influence the transition. It highlights the benefits of timely and appropriate transitions to palliative care in improving patient quality of life and reducing healthcare costs.

Despite the increasing recognition of the importance of palliative care, several barriers hinder its implementation

in cancer patients, including the lack of education and training of healthcare providers, limited access to palliative care services, and the stigma associated with palliative care.

The availability of sources in the subject area is substantial, indicating the growing interest in the transition from curative to palliative care in cancer patients. The literature on palliative care in cancer patients is diverse and covers a range of topics, including the benefits of palliative care, the challenges associated with its implementation, and the impact of palliative care on patients and their families.³

In conclusion, the review highlights the importance of palliative care in improving the quality of life of cancer patients and their families. It emphasizes the need for timely and appropriate transitions to palliative care and provides evidence-based recommendations for overcoming the barriers to integration. The review also underscores the critical role of healthcare providers in facilitating the transition from curative to the palliative care.

CURRENT STATE OF RESEARCH

The transition from curative to palliative care in cancer patients is a growing area of research interest. With increasing cases and deaths each year due to cancer, the focus is shifting towards palliative care to enhance patient quality of life. Research has explored different aspects of this transition, including timing, influencing factors, and impact on patient outcomes. Timely transitions to palliative care have been found to improve patient quality of life and reduce healthcare costs. Palliative care aims to manage pain and symptoms, address psychological and social issues, and provide spiritual support. Understanding and promoting the transition to palliative care is crucial in providing optimal care and improving patient outcomes.

EARLY PALLIATIVE CARE INTERVENTIONS

Studies have shown that early palliative care interventions can improve the quality of life of patients with cancer. In a randomized controlled trial, a study demonstrated that early palliative care interventions for patients with metastatic non-small-cell lung cancer improved patient quality of life and prolonged survival.⁴ The intervention group received weekly palliative care visits in addition to standard oncology care, while the control group received only standard oncology care.

The study found that the intervention group had better quality of life, less depression, and prolonged survival compared to the control group. Similar studies have shown that early palliative care interventions can improve symptom management, reduce psychological distress, and enhance patient satisfaction with care.⁵

TIMING OF THE TRANSITION

Research suggests that earlier transitions to palliative care can result in better patient outcomes, such as improved quality of life, reduced symptom burden, and prolonged survival. A study of patients with advanced lung cancer found that those who received early palliative care in addition to standard oncologic care had better quality of life, lower rates of depression and anxiety, and longer median survival than those who received standard care alone. Similarly, a systematic review found that early palliative care interventions improved patient outcomes across different cancer types and stages of the disease. These findings emphasize the importance of timely transitions to palliative care and the need for healthcare providers to identify suitable patients who may benefit from this approach.⁶

FACTORS INFLUENCING THE TRANSITION

The factors influencing the decision to switch from curative to palliative care for cancer patients have been identified in various studies. Patient preferences, disease stage and prognosis, symptom burden, comorbidities, and social support are some of the significant factors affecting this decision.⁵⁻⁸ Patients who prioritize symptom control and quality of life over survival may benefit from palliative care, regardless of their treatment preferences.⁶ Similarly, those with advanced or metastatic cancer, significant symptom burden, and comorbidities may also benefit from palliative care to manage their symptoms and improve their quality of life.^{6,7} Patients with strong social support may better cope with the physical and emotional challenges of cancer and have better outcomes.⁷ Early transitions to palliative care may lead to better patient outcomes, including symptom management, quality of life, and satisfaction with care.⁸ However, further research is required to understand the factors influencing this transition and to develop effective interventions to improve the quality of care for cancer patients.

IMPACT OF THE TRANSITION

The transition from curative to palliative care has significant impacts on both patients and healthcare systems. Patients receiving palliative care report better quality of life, reduced symptoms, improved psychological well-being, and higher rates of satisfaction with care.⁹ Palliative care can also result in reduced healthcare costs, improved caregiver outcomes, and better end-of-life care for patients with advanced cancer. Timely transitions to palliative care are crucial, and healthcare providers must identify suitable patients who may benefit from this approach. Further research is necessary to understand the factors influencing the transition and to develop strategies for promoting timely and appropriate transitions. Effective interventions and policies are needed to improve the quality of care for

cancer patients and their families, prioritizing patient-centered care.

OVERCOMING BARRIERS TO PALLIATIVE CARE IMPLEMENTATION

Although integrating palliative care into cancer care has numerous benefits, several barriers exist that prevent its widespread implementation. One major obstacle is the lack of awareness and understanding of palliative care among patients, families, and healthcare providers. Many people associate palliative care with end-of-life care and may not realize its potential benefits earlier in the cancer journey. Healthcare providers may also lack knowledge and training in palliative care, leading to underutilization of palliative care services.^{10,11}

A further barrier to palliative care integration is the lack of access to palliative care services. Palliative care services may not be available in all healthcare settings, particularly in rural or underserved areas. In addition, insurance coverage for palliative care may be limited or non-existent, creating financial barriers for patients and families.¹²

Stigma associated with palliative care is also a significant barrier to its integration. Palliative care may be perceived as giving up on curative treatment or as a sign of weakness. This stigma can prevent patients from accepting palliative care services and may lead to delayed referrals for palliative care.¹³

Despite these challenges, there is a growing recognition of the need for palliative care, and efforts are being made to overcome these barriers. One way to address these issues is to promote greater education and awareness among healthcare providers, patients, and the general public about the benefits of palliative care. This includes encouraging a more proactive approach to palliative care, in which it is offered earlier in the course of the illness and in conjunction with curative treatments. Additionally, more research is needed to better understand the factors that influence the transition from curative to palliative care and to develop effective interventions to improve the quality of care for cancer patients.

Increasing access to palliative care services is an essential strategy for overcoming the barriers to palliative care integration. Palliative care services should be available in all healthcare settings, including hospitals, clinics, and home care settings. This can be achieved through the development of palliative care programs and services in healthcare organizations, as well as partnerships with community-based palliative care providers.¹⁴

Furthermore, expanding insurance coverage for palliative care services is crucial to ensure that all patients have access to these services. Advocacy efforts by healthcare organizations and patient advocacy groups can be effective in achieving this goal.¹² By increasing access to

palliative care services, patients and families can benefit from improved quality of care and support throughout the cancer journey.

INTERDISCIPLINARY COLLABORATION AND COMMUNICATION IN PALLIATIVE CARE

Effective integration of palliative care into cancer care requires interdisciplinary collaboration and communication among healthcare providers. Palliative care should not be viewed as a separate entity from cancer care, but as an essential component that should be incorporated throughout the continuum of care.¹⁴ Collaboration among oncologists, nurses, social workers, chaplains, and other healthcare providers is necessary to manage patient symptoms, provide psychological support, and coordinate care across settings.

To ensure that patient goals and preferences for care are understood and incorporated into the care plan, regular communication and shared decision-making among healthcare providers, patients, and families are necessary¹⁵. Effective communication can also facilitate early identification of patients who may benefit from palliative care and improve the timing of referrals to palliative care services.

Healthcare providers should receive education and training in palliative care and communication skills, have access to appropriate resources, and be incentivized for interdisciplinary collaboration and communication. Effective integration of palliative care into cancer care can improve patient outcomes and enhance the quality of life for patients and families facing life-limiting illnesses.

INTEGRATION OF PALLIATIVE CARE INTO CANCER CARE

Integrating palliative care into cancer care has numerous benefits, including improved patient outcomes and satisfaction with care, lower healthcare costs, and enhanced overall quality of care. The American society of clinical oncology (ASCO) recommends integrating palliative care as a standard of care for all patients with advanced cancer and as early as possible for those with metastatic or advanced stage disease.¹⁶ The national comprehensive cancer network (NCCN) has also developed guidelines that recommend palliative care services be available throughout the continuum of cancer care and that all patients with advanced or metastatic cancer receive an early palliative care assessment.¹⁷

However, barriers to integration of palliative care exist, and education and training for healthcare providers, patients, and families are necessary to overcome them.¹⁸ Healthcare providers should receive education and training in palliative care, while patient education materials, support groups, and counselling services can help provide education and information about palliative care to patients and families.¹² Such education and

training can ensure that patients and families have a better understanding of palliative care and can make informed decisions about their care.

APPROACHES TO PALLIATIVE CARE

Palliative care can be provided through various approaches such as hospice care, home-based palliative care, and hospital-based palliative care. Hospice care is typically offered to patients who have a life expectancy of six months or less, and its primary focus is on providing comfort and support to the patient and their family during the end-of-life period. Home-based palliative care is provided by a team of healthcare providers in the patient's home, which enables patients to receive care while staying in the comfort of their own home. Hospital-based palliative care, on the other hand, is provided in a hospital or other healthcare facility and can cater to patients with complex medical needs.¹⁹

CHANGING THE PERCEPTION OF PALLIATIVE CARE

Overcoming the stigma associated with palliative care is crucial for its integration into comprehensive cancer care. Palliative care should be viewed as an integral component of cancer care that can improve patient outcomes and quality of life. This can be achieved through patient and provider education, awareness campaigns, and efforts to change the language used to describe palliative care. The focus should be on promoting the benefits of palliative care, such as symptom management, emotional support, and goal-setting, rather than focusing solely on end-of-life care.¹³

Healthcare providers should also be encouraged to discuss palliative care early in the treatment process, so patients and families can understand the benefits and make informed decisions about their care.¹³ Additionally, patients and families should be empowered to ask for palliative care services if they feel they would benefit from them.

By changing the perception of palliative care and increasing its availability, patients and families can receive the support they need throughout their cancer journey, leading to better outcomes and quality of life.

CONCLUSION

The integration of palliative care into comprehensive cancer care is crucial for improving patient outcomes, symptom management, and overall satisfaction with care. Timely and appropriate transitions to palliative care can improve patient quality of life, reduce symptom burden, and decrease healthcare costs. However, several barriers to the implementation of palliative care exist, including lack of awareness and understanding of palliative care, lack of access to palliative care services, and stigma associated with palliative care. Overcoming these barriers

requires interdisciplinary collaboration and communication among healthcare providers, education and training for healthcare providers, patients, and families, increasing access to palliative care services, and changing the perception of palliative care. The decision to transition to palliative care is complex and influenced by several factors, and further research is needed to better understand these factors and develop effective interventions to improve the quality of care for cancer patients. The integration of palliative care into cancer care should occur from the time of cancer diagnosis and should be viewed as an integral component of comprehensive cancer care.

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