

Hospice doesn't offset intensive end-of-life ovarian cancer care

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(HealthDay)—Increasing use of hospice in the final days of ovarian cancer does not offset intensive end-of-life care in older women, according to a study published online Oct. 6 in the *Journal of Clinical Oncology*.

Alexi A. Wright, M.D., from the Dana-Farber Cancer Institute in Boston, and colleagues examined changes in medical care during the last month of life over time for 6,956 individuals (aged ≥ 66 years) enrolled in fee-for-service Medicare. Patients were diagnosed with epithelial [ovarian cancer](#) between 1997 and 2007, and died as a result of ovarian cancer by December 2007.

The researchers found that between 1997 and 2007, [hospice](#) use increased significantly, and terminal hospitalizations decreased (both P

intensive care unit admissions, hospitalizations, repeated emergency department visits, and health care transitions (all $P \leq 0.01$). Over time the proportion of patients referred to hospice from inpatient settings rose ($P = 0.001$). Compared to outpatients, inpatients referred to hospice were more likely to enroll in hospice within three days of death (adjusted odds ratio, 1.36).

"Use of hospital-based services increased over time, and patients underwent more transitions among health care settings near death, suggesting that the increasing use of hospice did not offset intensive end-of-life care," the authors write.

More information: [Abstract](#)
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