

Critical illnesses cause 1 in 20 cancer patients to be admitted to intensive care, with 25% dying

August 31 2015, by Stuart Forsyth

Critical illness may affect chances of surviving cancer, a new study has found.

Researchers at the University of Glasgow found 1 in 20 [patients](#) with a [tumour](#) were admitted to an [intensive care unit](#) (ICU) within two years of their [diagnosis](#) – with a quarter dying in hospital.

The study published in *JAMA Oncology* found the risk of ICU admission increased with age.

The researchers used cancer registry and hospital data from Scotland spanning 10 years, capturing more than 118,500 people with cancer, including 6116 (5%) who were admitted to ICU.

The risk of ICU admission was highest among patients with gastrointestinal cancer and lowest in those with [prostate cancer](#), [breast cancer](#) and melanoma of skin.

Mortality after admission was highest among emergency medical admissions and lowest among elective surgical admissions. Hospital mortality was often high among those with cancers with otherwise good prognoses, such as breast and colorectal cancer.

The percentage of ICU patients who died in hospital was higher among

those who received organ support (34.8%) compared with those who had not (9.7%). Less than 5% of patients who were elective surgical admissions that did not receive organ support died during their hospital stay.

In contrast, 60.1% of patients who were emergency medical admissions and received organ support died in hospital.

The proportion of deaths during hospital stays was highest for patients with cancers of unknown primary cause, followed by lung cancer (60.3%), liver cancer (56.7%).

Mortality was lowest for head and neck cancers (11.8%), multiple cancers (17.6%), kidney cancer (14.3%), and thyroid cancer (10.7%).

Dr David Morrison, of the Institute of Health & Wellbeing at the University of Glasgow and one of the authors of the report, said: "There is a debate in the UK as to why cancer survival in this country is worse than other European nations.

"Our study suggests [critical illness](#) may play an important role in determining overall cancer outcomes and explain variations in cancer survival.

"It is likely that as the population ages and cancer therapies are more widely used, there will be increasing demands for ICU care in this population.

"If ICUs are effective in reducing the risk of dying following a critical illness, increased surveillance for early signs of critical illness and improved access to ICU care for patients with cancer might help to improve overall survival rates."

More information: "Risk of Critical Illness Among Patients With Solid Cancers," *JAMA Oncol.* Published online August 27, 2015. [DOI: 10.1001/jamaoncol.2015.2855](https://doi.org/10.1001/jamaoncol.2015.2855)

Provided by University of Glasgow

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