

# Lack of research keeps end-of-life care in status quo

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Randomized controlled trials often are considered the gold standard of research studies that help guide the medical care of patients across the world. However, in hospices, randomized controlled trials are difficult to conduct since patients are so close to the end of their lives, causing a gap in research that could improve the quality of hospice care overall. Now, a University of Missouri School of Medicine researcher has found that only 10 randomized controlled trials have taken place in U.S. hospices since 1985. The researcher said more randomized trials by hospice researchers could lead to improved care for hospice patients.

"Improving care for hospice patients and their families depends, at least in part, on conducting high-quality research in hospice settings," said Robin Kruse, Ph.D., research professor in the Department of Family and Community Medicine at the MU School of Medicine. "Research is how we make things better. Without research, we either maintain the status quo or implement programs that lack evidence."

Kruse and her colleagues analyzed all hospice research studies conducted between 1985 and 2015. They found only 10 hospice studies used randomized control trials, and none of the studies directly addressed managing pain, one of the most cited problems for hospice patients.

"Managing pain for hospice patients relies heavily on research conducted on other populations like cancer patients, with the assumption that treatments and results will be the same," Kruse said. "It's a common assumption among researchers that results from other pain studies can be

applied to hospice patients, but without targeted studies specifically in hospices, no one can know for sure if those are the best practices for that specific group."

Kruse said there are several strategies researchers can use to conduct more successful studies in hospices, including building strong relationships between hospices and the research team, using research staff who are embedded in hospices and using electronic health records for patient data.

Overall, Kruse believes that if hospice researchers focused more on conducting randomized trials that do not place significant burdens on patients, families or hospice staff, it could lead to improved care for hospice patients. She encourages more researchers to address the gap of evidence-based results in hospice settings so these patients receive the best care possible in the last months or weeks of their lives.

Kruse's study, "[Randomized Clinical Trials in U.S. Hospices: Challenges and the Current State of the Art](#)," recently was published in *Clinical Investigation*, a journal focused on the progress and outcomes of clinical trials.

Provided by University of Missouri-Columbia

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