

ESMO publishes new position paper on supportive and palliative care

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ESMO, the leading professional organisation for medical oncology, published a position paper on supportive and palliative care in its leading scientific journal, *Annals of Oncology* today.

Taking stock of new evidence in the field and building on previous ESMO statements and dedicated Clinical Practice Guidelines, ESMO is calling attention to the evolving and growing gap between the needs of <u>cancer patients</u> and the actual provision of patient centred care, from the time of diagnosis, including supportive, palliative, end-of-life and survivorship care.

"New studies in the field of supportive and palliative care show that there may be a gap between what doctors think is important or disturbing for <u>patients</u>, and what patients really need. With this new position paper, we wanted to call attention to the fact that, as well as anti-tumour treatment, cancer patients need physical, psychological, social, and spiritual support, at every stage of the disease, from diagnosis. We refer to this as patient centred care," said Dr Karin Jordan, Department of Medicine V, Haematology, Oncology and Rheumatology, University of Heidelberg, Germany, ESMO Faculty Coordinator for Supportive and Palliative Care, ESMO Clinical Practice Guidelines subject editor for the supportive care section, as well as main author of the paper. Jordan continued: "Patients must 'set the tone' in supportive and palliative care. We need to make it easy for them to tell us how they feel, what they need and, of course, allow them to be fully involved in decision-making if we are to provide optimal patient centred care."



"The concept of patient centred cancer care is described in this paper (encompassing both supportive and palliative care), along with key requisites and areas for further work. We chose this term because we believe in a continuum of care focused on alleviating patients' physical symptoms and psychological concerns," explained Jordan.

Dr Matti Aapro, Cancer Centre, Clinique de Genolier, Switzerland, coauthor of the position paper, ESMO Faculty member, Past-president of the Multinational Association of Supportive Care in Cancer (MASCC), said: "Recent studies show that palliative and supportive care not only improves treatment, it also contributes to better use of existing resources, avoids waste and may ultimately also reduce the cost of treatment."

The ESMO Position Paper states that individual cancer patients will express different physical, psychological, social, existential and spiritual needs at different stages of the disease, that will often evolve over time. Therefore, patient centred care cannot be standardised, even though it is provided through a standard framework. To ensure that patients can voice their needs, oncologists should incorporate detailed and routine physical and psychological assessments allowing for supportive and palliative interventions to be personalised and integrated in the continuum of care. Patient reported outcomes (PROs) should be highly encouraged as requesting them has shown to be associated with better quality of life, fewer hospitalisations and even increased survival compared with usual care.

"A cancer diagnosis, the disease itself and the effects of anticancer treatment are major stress factors for patients. Around 14 million people are diagnosed with cancer around the world every year (6)," explained Jordan. "Over the last decade clinicians have accepted that, while survival and disease-free survival are both fundamental factors, overall quality of life is also crucial for patients."



"Patient centred interventions should be routinely discussed and evaluated by the multidisciplinary team (supervised by the oncologist) together with tumour directed treatment," said Jordan. "Of course, patient preferences and cultural specificities should be respected."

"We hope that this paper will contribute to develop a generalised culture and acceptance of supportive and palliative care, worldwide," said Aapro. "Basic patient needs such as pain relief are still not being widely met (7). Education is vital to make sure that essential supportive care is accessible to all cancer patients, everywhere. Quoting Dorothy Keefe, past MASCC president, I would say: 'supportive care makes excellent cancer care possible'."

"ESMO is committed to increasing awareness and education to bring patient centred care closer to all professionals; to improving collaboration between healthcare providers for the good of patients; and to promoting research, so that patient centred interventions are not only integrated, but also based on the best evidence," said Andrés Cervantes, Chair of the ESMO Educational Committee.

"Despite growing awareness of the need to develop patient centred care and recent progress in the field, more and better scientific evidence is required so that effective interventions can be proposed to cancer patients at each stage of their illness," said Jordan.

"This paper is important because it takes ESMO's long standing interest in supportive and palliative care - shown, for example in its Designated Centres of Integrated Oncology and Palliative Care accreditation programme (8) - a step further. Developments since the last ESMO position statement in supportive and palliative care in 2003 show that, not only do these interventions improve patient's quality of life (QoL), but also overall outcomes."



"ESMO appeals to health authorities in Europe and beyond to ensure that <u>cancer</u> patients have equal access to the best possible patient centred <u>cancer care</u> that resources allow," concludes Jordan. "This is a medical and ethical imperative."

The ESMO position paper includes chapters on:

- Key patient centred care interventions
- End of life care
- Need for specific training in patient centred care
- The role of multidisciplinary teams
- Integrating healthcare resources
- Research needs and resources in supportive and <u>palliative care</u>

More information: K Jordan et al, European Society for Medical Oncology (ESMO) position paper on supportive and palliative care, *Annals of Oncology* (2017). DOI: 10.1093/annonc/mdx757

N. I. Cherny. ESMO takes a stand on supportive and palliative care, *Annals of Oncology* (2003). DOI: 10.1093/annonc/mdg379

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