

Cancer doctors call for more training in palliative care and delivery of 'bad news'

May 28 2020



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Oncologists who practice and teach at the Johns Hopkins Kimmel Cancer Center are calling on medical oncology training programs to invest substantially more time educating physicians about palliative care



and how to talk to patients about "bad news."

In a commentary published on April 9, 2020, in the *Journal of Clinical Oncology*, the physicians noted studies showing that cancer doctors deliver <u>bad news</u> to patients an average of 35 times a month. "However, few have training in how best to do so," says Ramy Sedhom, M.D., a <u>medical oncology</u> fellow at the Johns Hopkins University School of Medicine and lead author.

According to the researchers, <u>oncology</u> fellows—those who have embarked on lengthy post-doctoral training programs specializing in <u>cancer care</u>—report getting more coaching on how to perform technical procedures such as bone marrow biopsies than how to conduct a meeting with patients and families facing difficult or limited choices in care and disease outcomes. At the same time, Sedhom says, research suggests that how doctors frame difficult conversations can influence and direct patient preferences for treatment or palliative care.

As advances in treatment have increased in number and complexity in recent years, many oncologists have moved from practicing general medical oncology to focusing on just one or two cancers, says Thomas J. Smith, M.D., professor of oncology and director of palliative medicine at the Johns Hopkins University School of Medicine.

"As a consequence," he says, "the abilities of these doctors to predict patient outcomes becomes even more complicated and highlights the need for palliative care training."

Smith, Sedhom and colleagues previously surveyed accredited oncology training programs in the United States, finding none that offered a combined or integrated medical oncology and hospice/palliative care medicine program. Seventy-three institutions, including Johns Hopkins Medicine, offer the training in separate programs.



Smith and Sedhom say their commentary finds that training in the science of communication can help oncologists effectively address patient emotions and in turn, help patients and their families make more informed decisions about treatment choices.

More information: Ramy Sedhom et al. The Case for Focused Palliative Care Education in Oncology Training, *Journal of Clinical Oncology* (2020). DOI: 10.1200/JCO.20.00236

Provided by Johns Hopkins University School of Medicine

Citation: Cancer doctors call for more training in palliative care and delivery of 'bad news' (2020, May 28) retrieved 2 May 2024 from

https://medicalxpress.com/news/2020-05-cancer-doctors-palliative-delivery-bad.html

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