

Palliative care improves quality of life for patients with advanced blood cancer

December 17 2020



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A first-of-its-kind intervention integrating palliative care early in the course of cancer therapy for patients with advanced acute myeloid leukemia (AML), a highly aggressive cancer of the blood and bone

marrow, resulted in substantial improvements in patients' quality of life, mood and end-of-life care, a team of investigators has found.

"We know from the literature that [patients](#) with acute myeloid leukemia have high rates of post-[traumatic stress disorder](#)," says co-investigator Areej El-Jawahri, MD, a hematologist-oncologist at Massachusetts General Hospital (MGH) Cancer Center.

El-Jawahri and colleagues at Duke University Medical Center in Durham, North Carolina, the University of Pennsylvania in Philadelphia and Ohio State University in Columbus, conducted a randomized clinical trial demonstrating the benefits of early integration of [palliative care](#) into oncology care for patients with high-risk AML.

They report their results in *JAMA Oncology*.

The World Health Organization defines palliative care as "an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual."

Previous studies have shown that specialty palliative care improves quality of life, reduces symptom severity and psychological stresses, and enhances end-of-life care for patients with solid tumors.

"A lot of work has been done on integration of palliative care for patients with solid tumors, but there has been less attention paid to the integration of palliative care for patients with blood cancers," El-Jawahri says. "There have been multiple barriers to palliative care integration in this population, including the misperception equating palliative care with end-of-life care, and not understanding the potential benefit of palliative

care beyond enhancing end-of-life outcomes."

Palliative care has been shown to improve quality of life and reduce psychological stress for patients who undergo [bone marrow](#) transplants to treat blood cancers, but "oncologists rarely consult palliative care for patients with AML, in part due to the lack of evidence for the role of early palliative care in this population," El-Jawahri and colleagues write.

In the trial, 160 adults treated at the four comprehensive cancer centers for advanced AML were randomly assigned to the intervention or to usual care.

"This is the first multi-site randomized trial of an integrated palliative care intervention in patients with any blood [cancer](#)," says co-investigator Thomas W. LeBlanc, MD, a medical oncologist and palliative care physician at Duke.

Patients assigned to the integrated palliative and oncology care (IPC) intervention met with palliative care specialists who focused on establishing a relationship with each patient, assessing their needs, treating their symptoms, understanding their goals and expectations for treatment, and helping make decisions about their therapy.

Patients assigned to usual care received supportive measures from their oncology team and were permitted to receive palliative care if they or their oncologist requested it. Only six of the 74 patients assigned to usual care received palliative care early in the course of their illness.

Patients who received IPC reported significantly better quality of life and lower levels of depression, anxiety and PTSD at two weeks, and the benefits of palliative care on all these measures continued through 24 weeks.

Of the patients who died, significantly more who had been assigned to IPC had discussed end-of-life care preferences with their clinicians, and significantly fewer underwent chemotherapy in the last few weeks of life. Chemotherapy at the end of life is not curative and is associated with significant side effects that can severely impair quality of life.

"This is not just about end-of-life care, but how do we help patients live in the best way possible for as long as possible?" says El-Jawahri.

More information: Areej El-Jawahri et al. Effectiveness of Integrated Palliative and Oncology Care for Patients With Acute Myeloid Leukemia: A Randomized Clinical Trial. *JAMA Oncol.* Published online December 17, 2020. [DOI: 10.1001/jamaoncol.2020.6343](https://doi.org/10.1001/jamaoncol.2020.6343)

Provided by Massachusetts General Hospital

Citation: Palliative care improves quality of life for patients with advanced blood cancer (2020, December 17) retrieved 26 April 2024 from <https://medicalxpress.com/news/2020-12-palliative-quality-life-patients-advanced.html>

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