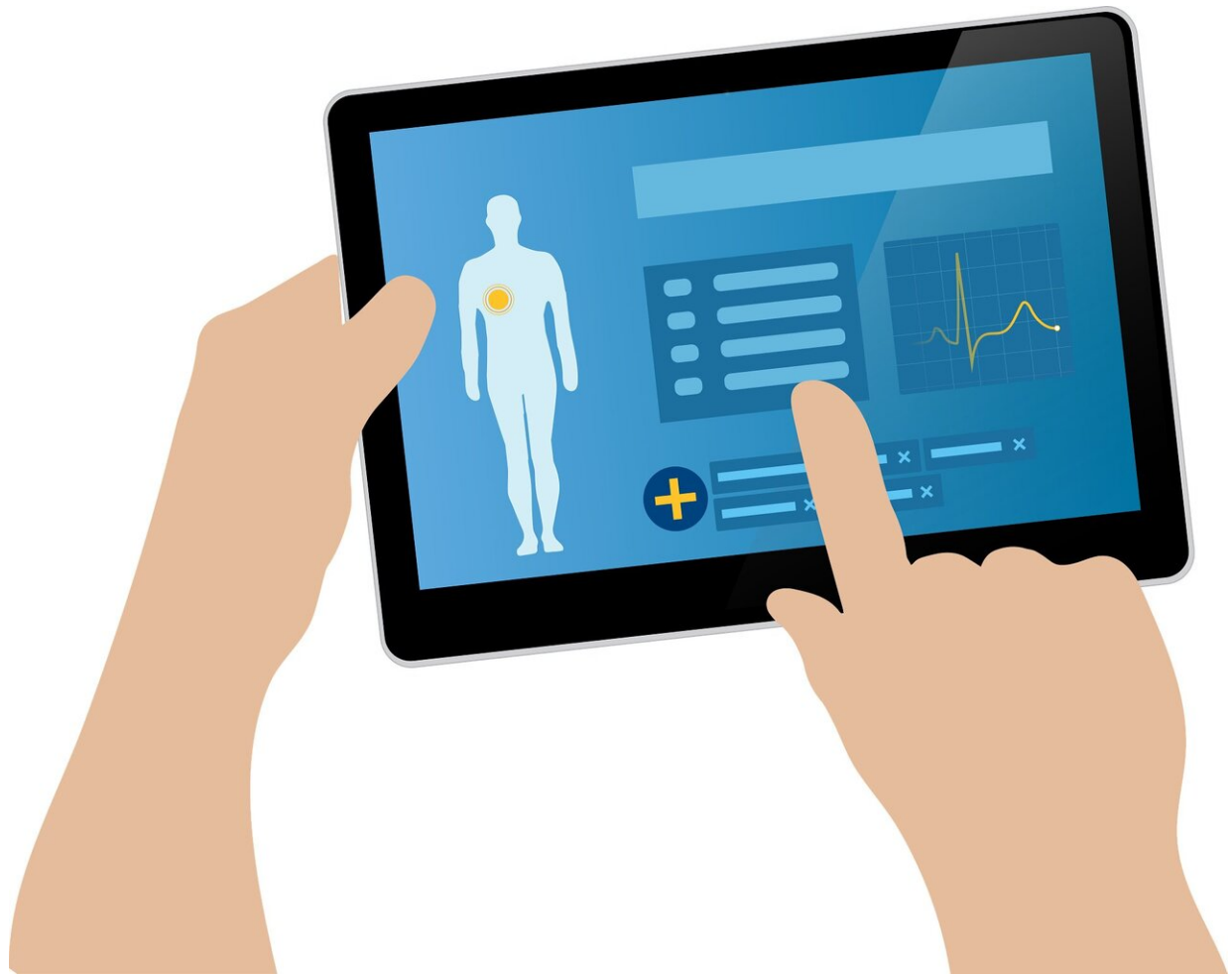


New research shows unmet support needs can lead to worse clinical outcomes

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Cancer patients with unmet supportive care needs are more likely to experience worse clinical outcomes, including more emergency department (ED) visits and hospitalizations, according to new research from Sylvester Comprehensive Cancer Center at the University of Miami Miller School of Medicine.

The study, published June 21 in *JAMA Network Open*, also found that Black race, Hispanic ethnicity and factors such as anxiety, depression, pain, poor physical function and low health-related quality-of-life scores were associated with greater number of unmet needs, leading to increased risk for ED visits and hospitalizations.

This [retrospective analysis](#) involved 5,236 patients treated at Sylvester's various ambulatory cancer sites who used its My Wellness Check, an electronic health record-based system, that monitors patients' emotional, physical and psychosocial needs.

"This study, to our knowledge, is the most comprehensive assessment to date that links unmet supportive care needs to ED visits and hospitalizations among ambulatory oncology patients," said Frank J Penedo, Ph.D., Sylvester's associate director for Cancer Survivorship and Translational Behavioral Sciences and corresponding author of the research. "It included a very diverse group of patients treated at our various cancer clinic locations and across multiple phases of the cancer care continuum."

Other key takeaways from this study included:

- 940 or 18% of patients reported one or more unmet supportive care needs, with about a third of them noting two or more unmet needs.
- Almost one quarter of patients with unmet support needs had ED visits, compared with 14% for those without unmet needs.

- For hospitalizations, the differences were 23% and 14%, respectively.
- Support for coping with cancer and financial concerns were the most reported unmet needs, followed by general cancer education and information.
- Diverse representation with Hispanics comprising almost 48% of study patients while other [racial groups](#) included Blacks, Caucasians, Asians, American Indians, Native Alaskans, Native Hawaiians and other Pacific Islanders.

"Our findings offer strong evidence that unmet supportive care needs are associated with unfavorable clinical outcomes, particularly higher risk for ED visits and hospitalizations," Penedo said. "Addressing these unmet needs is crucial to improve clinical outcomes and particularly in racial and ethnic minority populations where the needs are greatest."

More information: Frank J. Penedo et al, Factors Associated With Unmet Supportive Care Needs and Emergency Department Visits and Hospitalizations in Ambulatory Oncology, *JAMA Network Open* (2023). [DOI: 10.1001/jamanetworkopen.2023.19352](https://doi.org/10.1001/jamanetworkopen.2023.19352)

Provided by Sylvester Comprehensive Cancer Center

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