

Quality of the end of life care for adult inpatient with advanced cancer in Saudi Arabia

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Background: End-of-life care is one of the principle components of cancer care. Measuring quality of life is an important issue for monitoring clinical practice and improving outcome. This study is aiming to assess the quality of care provided by oncology department to adult in patients with advanced cancer in the last month of their life.

Methodology: Retrospective chart review of adult cancer inpatients for 6 months. Review of data include cancer patients in the last month of their lives. The primary outcome to assess the quality of end of life care provided by oncology department to inpatient with advanced cancer using The Cancer Quality-ASSIST.12 criteria were selected in this study to assess different aspects of care at the end of life.

Results: Total of 180 patient were included. 90% of patients were screened for pain. 98.7% of patients with dyspnea offered symptomatic management. 47% of patients were assessed for fatigue. 70% were assessed for nausea and vomiting. 95.6% of patients receiving chemotherapy were informed about the risks and benefits of treatment. 78.3% of patients with expected death been referred for palliative care prior to death. 86.7% of the patients were properly assessed for the need of PEG tube feeding. 71.1% (32/45) of patients

treated with chemo, they received chemotherapy during the last two weeks. 36.7% (66) patients visited ER once, 7.2% (13) twice. 26.1% (47) of patients were admitted to ICU once and one patient admitted twice. Mean time from palliative care referral to death was 78 days with median of 18 days. Social Support documented in 58.3% (105) of patients while Spiritual care documented in one patient only.


Discussion: Overall adherence to standards of physical care was good, however, more patients still receiving chemo in the last two weeks which is a poor-quality indicator. More attention is needed to psychosocial and spiritual care in order to improve the quality of care.

Conclusion: This set of quality indicators can evaluate the quality of supportive and end-of-life care provided to inpatients dying with advanced cancer and identify aspects of care that need improvement.

Speaker Biography

Abdullah Algarni is a Consultant and section head of Palliative medicine for the department of Oncology at King Abdulaziz Medical City. He was an Assistant professor at King Saud bin Abdulaziz University for Health Sciences at Riyadh, Saudi Arabia.

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