**Palliative Care: Integration of Palliative Care into Comprehensive Cancer Care**

**Can Improve Patient Outcomes and Reduce Costs**

**MAIN POINTS**

1. **Palliative care is essential, not optional.**

* Palliative care is one of the four essential components of comprehensive cancer care along with prevention, early diagnosis, and treatment.
* 2014 World Health Assembly Resolution on Palliative Care:
  + “Palliative care is an **ethical responsibility of health systems**, and ... it is the ethical duty of health care professionals to alleviate pain and suffering, whether physical, psycho-social or spiritual, irrespective of whether the disease or condition can be cured … .”[1]

1. **All types of suffering due to cancer should be palliated (relieved).**

* Cancer and cancer treatment generate many kinds of suffering:[2,3]
  + **Pain and other physical symptoms**
  + **Psychological problems** such as anxiety, depression, and delirium
  + **Social distress** such as extreme poverty, stigmatization
  + **Spiritual distress** such as loss of meaning or faith
* It is difficult or impossible for oncologists to expertly prevent, assess and relieve all types of suffering.[4] This is a basic task of palliative care.[5]

1. **Palliative care produces better outcomes**

* There is evidence that **combining palliative care with treatment of advanced cancer** produces better patient outcomes including **better quality of life** and **sometimes longer life**.
  + Temel, et al. 2010: “Among patients with metastatic non–small-cell lung cancer, **early palliative care** led to significant **improvements in both quality of life and mood**. As compared with patients receiving standard care, patients receiving early palliative care had less aggressive care at the end of life but **longer survival**.”[6]
* There also is evidence that involvement of palliative care:
  + Can improve patients’ and their families’ understanding of the illness.[7]
  + Can reduce **near-death cancer treatment** that is associated with **worse quality of death**, **lower caregiver satisfaction** with end-of-life care, and **higher costs**, yet that also **fails to improve survival**.[8,9,10]
  + Is unlikely to upset patients or families if done in a culturally appropriate manner.[11]

1. **Palliative care can reduce costs**

* There is extensive evidence from high-income countries that palliative care **reduces costs for healthcare systems** by **reducing hospital admissions and length of stay**.[12,13,14,15,16]
* There also is evidence that palliative care can **protect patients’ families from economic disaster**. [16,17]

1. **Summary: Cancer control programs could improve quality of care and reduce costs by integrating palliative care.**

**References**

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