



Effective Health Care

Palliative Care for Advanced Adult Cancers

Nomination Summary Document

Results of Topic Selection Process & Next Steps

- Palliative care for advanced adult cancers will go forward for refinement as a systematic review. The scope of this topic, including populations, interventions, comparators, and outcomes, will be further developed in the refinement phase.
- When key questions have been drafted, they will be posted on the AHRQ Web site and open for public comment. To sign up for notification when this and other Effective Health Care (EHC) Program topics are posted for public comment, please go to <http://effectivehealthcare.ahrq.gov/index.cfm/join-the-email-list1/>.

Topic Description

Nominator: Organization

Nomination Summary: The nominator is interested in whether palliative care provided earlier in the course of disease, with its focus on management of symptoms, psychosocial support, and assistance with decision making, has the potential to have a meaningful effect on patients' quality of life, satisfaction with treatment for advanced disease, and end-of-life care. The nominator is concerned that approaches used for palliative care vary considerably, as different sets of interventions and outcome measures have been used across research studies to assess its clinical impact. The nominator is also interested in the comparative effectiveness of palliative care (added to usual care) versus usual care alone for adults with advanced cancers. Specifically, it would be important to assess the impact on net health outcome of specific components and interventions of palliative care and its optimal timing during course of disease to determine which of the approaches used within research studies might be most fruitful for further investigations.

PICO from Nomination for Key Question 1:

Population(s): Adult patients with advanced cancers and their caregivers

Intervention(s): Palliative care integrated with standard (usual) oncologic care

Comparator(s): Usual oncologic care

Outcome(s): Survival, health-related quality of life (HR-QOL), patient/caregiver satisfaction, mood disorders (anxiety, depression) for patients and families, palliation of symptoms, safety/adverse events, resource use

Staff-Generated PICO for Key Question 2:

Population(s): Adult patients with advanced cancer and their caregivers

Intervention(s): Palliative care models (interdisciplinary care teams, use of multi-

disciplinary interventions, number of palliative care visits, early versus late introduction of palliative care)

Comparator(s): Different palliative care models

Outcome(s): Survival, HR-QOL, patient/caregiver satisfaction, mood disorders (anxiety, depression) for patients and families, palliation of symptoms, safety/adverse events, resource use

**Key Questions
from Nominator:**

1. What is the comparative effectiveness of usual care plus interdisciplinary palliative care versus usual care alone in improving net health outcome?
2. What is the evidence on comparative effectiveness of the various specific palliative care components and interventions that have been investigated and on the timing for their use (early versus later) over the course of disease progression?

Considerations

- The topic meets all EHC Program selection criteria. (For more information, see <http://effectivehealthcare.ahrq.gov/index.cfm/submit-a-suggestion-for-research/how-are-research-topics-chosen/>.)
- There are many gaps in current knowledge among clinicians and patients on palliative care and a need to assess the approaches used, optimal timing, and the clinical impact of the components of palliative care. A review of this topic would be helpful to both consumers and clinicians because: (1) it will clarify the definition of palliative care and distinguish between symptom management and a more comprehensive set of services provided by an interdisciplinary team; (2) it will highlight the important distinctions between palliative care and end-of-life care around which there is substantial confusion; and (3) it has the potential to influence decision-making. Therefore, the topic will go forward for refinement as a systematic review.