Cancer care in the 21st century

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Llandudno
November 2011
What is palliative care?

- “Palliative care is the active holistic care of patients with advanced, progressive illness. Management of pain and other symptoms and provision of psychological, social and spiritual support is paramount. The goal of palliative care is achievement of the best quality of life for patients and their families. Many aspects of palliative care are also applicable earlier in the course of the illness in conjunction with other treatments.”
  
  – National Council for Hospice and Palliative Care (2002)
What is different in the 21st Century?

- Care
- Drugs
- Research
- Society
‘How we care for the dying is an indicator of how we care for all sick and vulnerable people. It is a measure of society as a whole and it is a litmus test for health and social care services.’

– End of Life Strategy 2008
Nothing About Me, Without Me.
Changing Gear

Guidelines for Managing the Last Days of Life in Adults

These Guidelines have been developed by a multi-professional Working Party convened by The National Council for Palliative Care under the Chairmanship of Dr Derek Doyle OBE. They were originally drafted for the Working Party by Dr Robert Dunlop, Medical Director, St Christopher’s Hospice, London and revised by Professor Irene Higginson, Department of Palliative Care & Policy at King’s College School of Medicine & Dentistry and St Christopher’s Hospice, London, in order to conform to the Clinical Outcomes Group (COG) Guidelines.
CANCER PAIN RELIEF
Second Edition

With a guide to opioid availability

World Health Organization
Geneva
Budapest Commitments: setting the goals

Research.

- Research is essential to create the evidence base for the field of palliative care. Randomised trials may not always be the best option for palliative care trials, and systematic efforts to develop the methodology for palliative care research are an integral part of palliative care research
  - Editorial Palliative Medicine 2007 21: 269-271
Research Problems

• “It’s difficult”
  – Consent
  – Protecting patients
  – Extra work/bother
  – Lack of a research culture
  – Ethics Committees
Research Methodology;

• That reduces or removes the need for consent at a difficult or impossible time
• That makes research an imbedded part of normal practice without creating extra intrusive steps in patients care
Pilot study

• Cluster Randomisation versus Randomised Consent (Zelen)
  – 2 units
  – Crossover design
  – Model question “Do you need to add an anti-emetic routinely to a syringe driver for a dying patient”

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• Palliative Medicine 2006;20:799-804
Society

- Standards
- Cost
- Attitudes to Death
- Advance Directives
- Physician Assisted Suicide
Cancer as a model for health care as a whole

- “Thank goodness he has cancer, now he will get the care he needs.”
• ‘How people die remains in the memory of those who live on’

» Dame Cicely Saunders