

## A Comparative study on the effect of palliative care between palliative care team and medical oncologists in patients with advanced cancer at Phramongkutklo hospital

Pitchayapa Pornrattanakavee, Tassaya Srichan, Kasan Seetalarom, Siriwimon Saichaemchan, Nittha Oer-areemitr and Naiyarat Prasongsook

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**Background:** Palliative care for advanced cancer patients improves suffering symptoms, quality of life (QoLs). However, routine implementation of palliative care by specialty palliative care consultation is still unmet need among advanced cancer inpatients. Our study aim is to evaluate the effectiveness of team-based approach on QoLs and readmission rate when compare to routine practice by among medical oncologists.

**Methods:** This study was prospective, Quasi-Experimental design. Advanced cancer inpatients were non-randomly assigned to receive palliative care service by team-based approach (palliative care specialists and medical oncologists) or medical oncologists only. The primary endpoint was QoL. The secondary endpoint was readmission rate at 7, and 30 days of hospital discharge. QoL were assessed by Thai- Hospital Anxiety and Depression Scale (Thai-HADS) and Thai- Functional Assessment of Cancer Therapy- General scale (Thai-FACT-G) at 1 st , and 7 th day of admission.

**Results:** One hundred twenty-two inpatients were enrolled. Patients who were assessed by team-based approach had improvement of either anxiety or depression at day 7 of hospital discharge significantly, which anxiety scores were  $6.62 \pm 4.16$  at baseline vs  $4.9 \pm 3.13$  at day 7 ( $p$ -value=0.003), and depression scores were  $7.05 \pm 4.56$  at baseline vs  $4.87 \pm 3.16$  at day 7 ( $p$ -value<0.001). Only depression scores were significantly improved at day 7 of admission in patients who were assessed by medical oncologists ( $8.21 \pm 4.69$  at baseline vs  $7.02 \pm 4.73$  at day 7;  $p$ -value=0.006). However, there were no statistically significant different in change of anxiety-, and depression scores between two groups ( $p$ -value=0.39, and  $p$ -value=0.62, respectively). For QoL aspect, inpatients who were assessed by team-based approach had significantly improved in change scores of subjective well-being (SWB) when compare to another group ( $\Delta$  SWB: -1 (-19 – 11) vs 0 (-9 – 15),  $p$ -value=0.043). Furthermore, inpatients who were assessed by team-based approach had significantly decreased in term of readmission rate at 7 days of hospital discharge (4.92% in team-based approach group vs. 19.67% in medical oncologist group,  $p$ -value=0.013).

**Conclusions:** Interdisciplinary collaboration is key success for establishing goal of care, which are supporting the best possible QoL and relieving suffering symptoms for those advanced cancer inpatients. Furthermore, readmission rate at 7 days of hospital discharge was significantly reduced by team-based approach. Therefore, comprehensive palliative care assessment by interprofessional collaborative practice is required.

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