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The Gap between Research in Developing and Developed Countries in Asia

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The place of research in Palliative Care was emphasized right from the early work of

Dame Cicely Saunders

1918-2005

Founder of the International Hospice Movement



Qualified St. Thomas' Hospital 1957
I mmediately after house-jobs she
took up a Research scholarship from
St Mary's Hospital London for
Pain in the Terminally III



She spent three days per week at St. Joseph's Hospice

She studied the use of regular, individualized doses of oral morphine on pain in terminally ill cancer patients, and published her findings in *Drugs and Therapeutics Bulletin* in 1964

Yet research remains difficult to establish not only in developing countries in Asia but in the more developed countries also

Some of the problems are generic:

Lack of resources

Lack of "protected" time for research

Lack of skills in research

Low priority for research

There are specific problems:

A frail population
Worries about consent
intrusion
privacy
High attrition rate
Handling of missing values

Both the subjects & the subject matter requires new research methodology

Qualitative research
Quality of life research
Use of proxies
Measuring effectiveness of communication
Measuring Dignity
Measuring Suffering
Randomized controlled trials

The Asia Pacific Region

Great diversity of population, race, language, wealth

There are now >600 palliative care services in the region

Great variation in the level of service provided





Countries where Palliative Care services are very advanced:

Australia New Zealand

Countries where Palliative Care services are fairly developed:

Japan Korea Taiwan Hong Kong Singapore



Countries where Palliative Care services have started:

Malaysia
Philippines
Indonesia
Thailand
Vietnam
Myanmar

Countries where Palliative Care services have hardly started:

Nepal
Bangladesh
Sri Lanka
Laos
Cambodia

Common themes for early research in developing countries

Description of services
Survey of prevalence of disease/symptoms
Audit of pain control
Interventions
Use of Drugs
Truth-telling

JAPAN

>130 palliative care units & 2,700 beds, but few free-standing in-patient hospices or home care services





Peace House Hospice
Kanagawa
with a View of
Mount Fuji

Glimpse of Research publications in Japan

Analysis of 281 related articles in Pub Med
on
Terminal Cancer
Home care
Bereavement

Shiragawa K.

A discussion of opinion survey among bereaved families of patients with terminal cancer under home care.

Gan To Kagaku Ryoho. 2002 Dec; 29 Suppl 3:493-5

Analysis of 281 related articles

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120 articles with Japanese authors (42.7%)
8 articles from Asia Pacific region (2.8%)

Taiwan - 3

Hong Kong - 3

Korea - 1

China - 1
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281 related articles

Analysis of 120 articles with Japanese authors

Only 8 were published in English (6.7%) 112 were published in Japanese

99 were published in 1 journal (82.5%)
Gan To Kagaku Ryoho

13 were published in 9 other journals (10.8%)

281 related articles Analysis of 120 articles by Japanese authors

The 99 published in *Gan To Kagaku Ryoha* dated from 1994 to 2005
43 of these were in 2002 & 2003

Of the 13 published in the other 9 Japanese journals 5 date from 1975 to 1983

Of the 8 published in English all 7 published in non-Japanese journals date from 2002 to 2005

281 related articles 120 articles by Japanese authors

Analysis of 108 articles whose source were stated

48 were from hospital departments (44%)
26 were from palliative care services (24%)
22 were from universities (20.3%)
19 were from nursing departments (17.6%)

Yet the 1st surprise was that Gan To Kagaku Ryoho = Cancer & Chemotherapy

There are ~ 7 journals in which palliative care workers publish their work

The top journal is Kanwa Kea = Palliative Care

All are in Japanese None are indexed journals

Yet a handful of Japanese researchers are getting their work published in international journals J Pain Symptom Manage,

Palliat Med, Support Care Cancer
J Clin Oncol
Particularly since 2002

In Korea Workers prefer to publish in English in oncology/haematology journals because of their higher impact factor

There is 1 non-indexed palliative care journal, which is in Korean, though some abstracts are in English

In Korea

It is estimated that only 10% of research done is published in English-language journals

Other publications include the literature on Pain, & Nursing journals

In Taiwan Research tends to be done mainly at university depts

There is one non-indexed Palliative Care Journal published in Chinese, but with abstracts in English

Generally research is not a priority in Palliative Care Units

Hong Kong and Singapore These are English-speaking places

Most publications are in the local general medical journals in English

A few make it into the international palliative care journals

Research may not be published
Or published in Abstract form only
Or presented only as Posters
Or be published in non-indexed journals
Or be published in the local language

Often a journal is started after the formation of professional organizations in Palliative Care

Many of these countries are not English-speaking The journal will then be in the local language

Most of these journals would not be indexed for a long time

National Cancer Hospital Hanoi Vietnam



Hospice Home Care in Myanmar



Conclusions

There are many barriers to setting up research in developing countries in Asia Time

Money
Expertise
Priority
Research culture