SELF-ASSESSMENT IN CANCER PATIENTS REFERRED TO PALLIATIVE CARE: A STUDY OF FEASIBILITY AND SYMPTOM EPIDEMIOLOGY

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BACKGROUND. Research in palliative care is considered difficult due to patients' poor health. However, patient-provided data are essential for a thorough description of patients' symptomatology and for the evaluation of care. METHODS. We examined the feasibility of a questionnaire-based study using the EORTC QLQ-C30, the Edmonton Symptom Assessment System (ESAS), and the Hospital Anxiety and Depression Scale (HADS) in cancer patients in palliative care. We describe the symptomatology of participating patients and examine differences in symptomatology between patients in three palliative care functions: inpatient, outpatient, and palliative home care. RESULTS. Of 267 eligible patients referred to the department, initial self-assessment questionnaires were obtained from 176 patients (65.9%). The 91 non-participants were older and had lower Karnofsky Performance Status (KPS) values than the participants. Almost all participating patients suffered from impaired physical and role function and had high levels of pain, fatigue, and other symptoms. According to the HADS, 47% of the patients suffered from depression. Outpatients scored better than inpatients and patients in palliative home care for physical function, role function, cognitive function, depression, and inactivity. CONCLUSIONS. It is possible to perform a questionnaire-based study of symptomatology in consecutive cancer patients in palliative care, achieving rather complete data from the participants. The symptomatology in these patients was very pronounced.
Reference: Strömgren et al., Cancer 2002 (in press)