Quality of life and symptoms as judged by terminally ill patients and their Professional Carers.

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There are no studies comparing Individualised QoL results with professional proxy assessments. Little is known about the impact of symptoms on patients QoL. SEIQoL is acceptable to terminally ill patients and has good psychometric properties.

Methods: Thirty consecutive cancer patients admitted to Our's Lady's Hospice Harold's Cross, were interviewed within a week of admission (time 1) and reinterviewed within a month (time 2). Doctors and nurses involved with the care of the patient were interviewed. The Schedule for the evaluation for individual Quality of Life-Direct Weighting (SEIQol –DW) was used to assess QoL. Symptoms were nominated by the patients and a modified SEIQoL DISK used to assess symptom interference with QoL.

Conclusion: Patients' QoL did not decrease as death approached, in fact, their QoL scores showed a higher mean and median score at the second assessment than at the first. Palliative care doctors are not good proxy assessors of patients' QoL of the degree of symptoms interference with QoL. Nurses are nearer to the patient' views. A case report, which includes an intervention reflects this.