Advanced cancer patients can live longer with palliative care, Tulane study says

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A team led by Michael Hoerger, right, an assistant professor of psychology, psychiatry and oncology at Tulane University, sampled more than 2,000 cancer patients about their palliative care experiences. Laura Perry, left, a health psychology PhD student, was on the research team. (Photo by Paula Burch-Celentano)

Outpatient palliative care can improve survival duration as well as quality of life in advanced cancer patients, according to a Tulane University study published in the *Annals of Behavioral Medicine*.

Palliative care focuses on helping patients manage their symptoms and cope with their illness through monthly meetings with a team of physicians, nurses, social workers, psychologists and other healthcare professionals with expertise in this area. It helps patients cope with a wide range of issues, including pain, depression, anxiety, loss of appetite and sleep difficulties.

A team of researchers led by Michael Hoerger, assistant professor of psychology, psychiatry and
Tulane University oncology at Tulane, sampled 2,092 patients with advanced cancers, most commonly lung and gastrointestinal cancers. They used a statistical method called meta-analysis to combine the results of eight randomized clinical trials that examined the impact of outpatient palliative care on patients’ survival and quality of life.

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Michael Hoerger, assistant professor of psychology, psychiatry and oncology

Findings showed that 56 percent of patients who were randomized to receive outpatient palliative care were alive after one year as opposed to 42 percent who received typical care. The numbers translate into palliative care patients living more than four months longer than their counterparts who did not receive palliative care.

“The survival benefit was comparable to what is often observed in the context of a breakthrough drug trial,” Hoerger said.

Laura Perry, a health psychology PhD student and a member of the Tulane research team, said the findings highlight the importance of palliative care and may reassure reluctant patients, caregivers, clinicians and payers that palliative care can reduce the suffering caused by advanced cancer.

“If outpatient palliative could offer a similar survival benefit at the population level, this would be like adding 250,000 person-years of life annually in North America alone,” Perry said.

The authors suggest that the findings provide a rationale for more high-quality studies of palliative care. The research team included three Tulane public health students — Graceanne Wayser, Gregory Schwing and Dr. Ayako Suzuki.