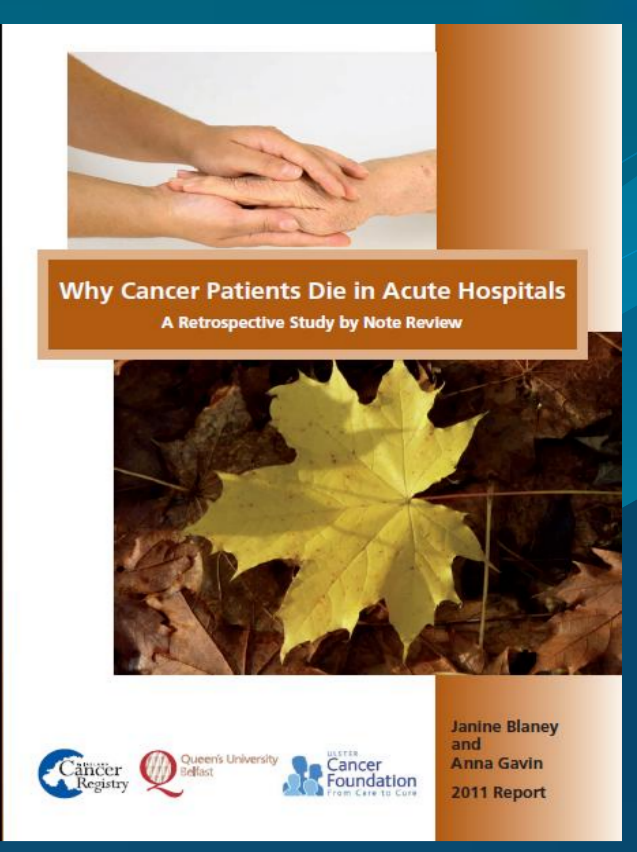


Why Cancer Patients Die in Acute Hospitals

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Objectives

To determine reasons for a hospital death among cancer patients.

Background

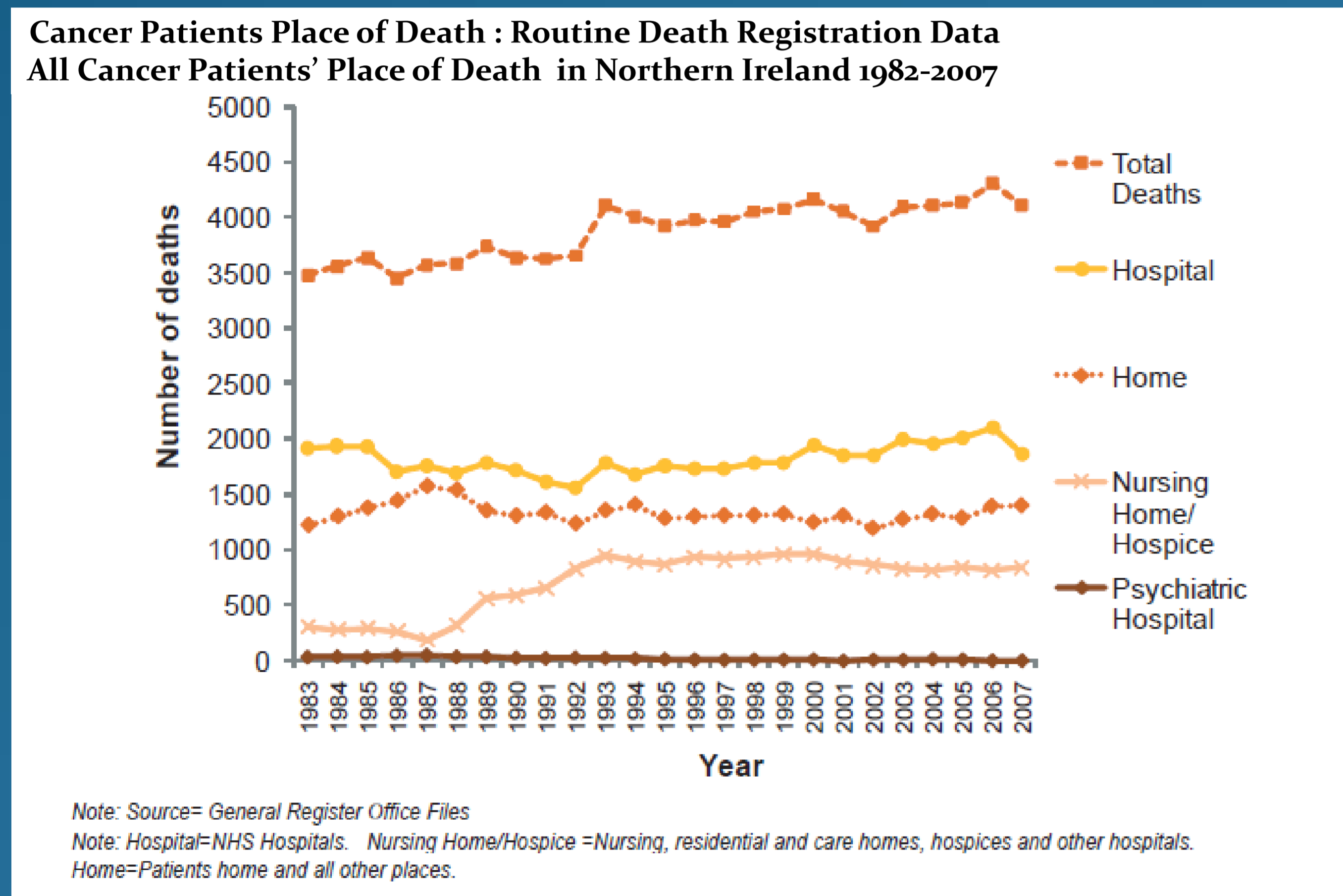
It is widely acknowledged that the majority of cancer patients' preferred place of death is home. However, latest figures for Northern Ireland show that only 34% achieve this. This study investigated the most likely factors influencing a hospital death.

Methods

Retrospective note review of adult cancer patient deaths within an acute hospital setting (July–December 2007).

In addition to medical and demographic information, detailed data were collected on the events surrounding patients' last hospital admission. Classification of reason for admission was performed by a clinician.

Results



695 patients were studied of which 53% were male. Cancers were mainly those of the Digestive Organs 76%, Lung 25% and Breast 8%. 63% were staged with 82% having Stage IV disease. 78% were admitted as an emergency, 4% admitted from Nursing Homes.

Main Symptoms by Cancer Diagnosis

Main Symptoms	Digestive Organs	Respiratory & Intrathoracic Organs	Breast	Female Genital Organs	Male Genital Organs	Other	Total
	N						
	182	170	58	35	38	212	695
	%						
Pain	53.3	42.9	55.2	48.6	36.8	48.6	48.3
Breathlessness	24.7	73.5	48.3	28.6	34.2	29.7	40.9
Anorexia	41.2	35.9	50.0	48.6	26.3	42.0	40.4
Nausea/Vomiting	39.0	19.4	44.8	60.0	31.6	34.0	33.8
Diarrhoea/Constipation	29.1	22.9	34.5	48.6	26.3	20.8	26.3
Cough	16.5	49.4	24.1	5.7	28.9	17.0	25.5
Weight loss	31.3	29.3	13.8	8.6	7.9	24.5	24.9
Dehydration	29.1	14.1	36.2	45.7	18.4	17.9	22.9
Lethargy	19.8	22.4	25.9	20.0	13.2	27.4	22.9
Confusion	15.9	17.1	29.3	5.7	21.1	21.7	18.8

Preferred place of death was recorded for 41% of patients

- 61.1% Home death
- 12.7% Hospital death
- 11.7% Nursing home
- 14.5% Hospice

Reasons for Delay in Discharge

Reasons for Delay	N (%)
1. Condition deteriorated	203 (76.3)
2. Lack of bed (Hospice/Other Hospital/Nursing Home)	33 (12.4)
3. Care package not in place	13 (4.9)
4. Family support not available	8 (3.0)
5. Symptom control	5 (1.9)
6. Family preferred patient to die in Hospital	3 (1.1)
7. Did not meet hospice admission criteria	1 (0.4)
Total	266 (38.3)

Note: Nursing home includes residential and care homes.

30% of patients who died in hospital with cancer died within 1 month of diagnosis, 45% within 3 months, 53% within 6 months.

Patients Diagnosed with Cancer within Last Month of Life by Demographic Information

Demographic Information	Diagnosed Last Month of Life		P
	Yes N (%)	No N (%)	
Age			
≤45	2 (1.0)	25 (5.2)	
46-60	11 (5.2)	78 (16.1)	
61-70	41 (19.5)	118 (24.3)	
71-80	83 (39.5)	154 (31.8)	
≥81	73 (34.8)	110 (22.7)	<0.001*
Gender			
Male	113 (53.8)	258 (53.2)	
Female	97 (46.2)	227 (46.8)	0.88
Marital Status			
Partnered	108 (51.4)	273 (56.3)	
Not Partnered	102 (48.6)	210 (43.3)	
Unknown	0	2 (0.4)	0.22
Geographical Area			
Urban	158 (75.2)	334 (68.9)	
Rural	52 (24.8)	150 (30.9)	
Unknown	0	1 (0.2)	0.20
Socioeconomic Status			
Quintile 1 (Most Deprived)	52 (24.8)	112 (23.1)	
Quintile 2	50 (23.8)	108 (22.3)	
Quintile 3	39 (18.6)	86 (17.7)	
Quintile 4	39 (18.6)	84 (17.3)	
Quintile 5 (Least Deprived)	30 (14.3)	94 (19.4)	
Unknown	0	1 (0.2)	0.69
Total	210 (30.2)	485 (69.8)	
Median Age	78 (13)	71 (17)	<0.001**

Note: *Significant at the p=0.05 Level (Chi-Square analysis).

Note: ** Significant at the p=0.05 Level (Mann-Whitney U Test).

Note: Geographical area and Socioeconomic Status determined by the postcode of patients' usual address.

The Liverpool Care Pathway (LCP) was in place for 386 (55.5%) patients and preferred place of death was recorded for 176 (46%) patients that were on the LCP. 67% (n=466) of all patients and 69% of patients with a known cancer diagnosis, received specialist palliative care in hospital. There were no statistically significant differences across Trusts.

Do Not Attempt Resuscitation (DNAR) orders were in place for 633 (91%) of patients, with no significant differences across Trusts.

Recommendations

1. All patients nearing end of life should have an advanced care plan in place which incorporates patients preferred place of death.
2. A major initiative to improve earlier recognition of cancer symptoms among both the public and healthcare professionals is required.
3. Nursing Homes should be specifically targeted for training in early recognition of cancer symptoms and have strategies developed to enable residents with cancer to die in their preferred place of death.
4. For the approximate 20% of patients whose condition would have allowed them to be discharged to their place of preference, efforts should be enhanced to ensure facilities and resources in the community are available to support patients and their carers.
5. The implementation of the Liverpool Care Pathway should be reinforced across all Trusts.

Acknowledgements

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