

1523P Cancer patients' perceptions of palliative care

J. Yoong¹, B. Chosich¹, M. Burgess¹, A. Earnest², F. Runacres¹, L. William¹, M. Franco¹, P. Poon¹

¹Supportive and Palliative Care Unit, Monash Health, Melbourne, Australia,

²Epidemiology and Preventive Medicine, Monash University, Melbourne, Australia

Background: Despite clear benefits and increased efforts towards earlier integration of palliative care (PC) with oncology, there are concerns that PC remains stigmatized and predominantly associated with end-of-life care (EOLC). This project aims to explore current perceptions and understanding of PC in cancer patients.

Methods: Prospective survey conducted in the oncology ward of a tertiary academic hospital in Melbourne, Australia. Over a 4-month period a 16-item questionnaire was distributed to all cancer patients upon admission to the ward (N = 103). Chi-Squared test was used to examine for significant factors related to patients' perceptions of PC.

Results: Ninety-six patients (93%) completed the questionnaire; of which 76% had metastatic cancer. Of the domains explored, salient findings were: 1) Familiarity and experience: 76% had heard of PC; while only 21% had received PC. Self-rating of PC knowledge was varied, and evenly distributed: 31% good/excellent, 36% average and 33% below average/poor. 2) Roles of PC and oncology: 86% believed they could receive concurrent oncology care and 81% believed they could receive anti-cancer treatment whilst receiving PC. Those who had heard of PC were significantly more likely to respond that they could receive concurrent anti-cancer treatment (p = 0.005), as well as those who had better self-rated PC knowledge (p = 0.045). 3) Perceptions: 45% believed PC was only associated with EOLC. Those more likely to disagree with this statement had received PC services (p = 0.039). The majority (77%) felt comforted with PC involvement; this was significantly associated with older age (p = 0.047) and

an understanding that oncology ($p < 0.005$) and anti-cancer treatment ($p = 0.013$) could continue. However, 40% felt frightened and 29% felt hopeless about a referral to PC. Notably, 50% felt more comfortable with “supportive care” services (versus PC), 25% were neutral and 25% were not.

Conclusions: This survey had an excellent response rate and results were reassuring that, in general, respondents had an accurate understanding of and positive perceptions of PC. Familiarity and comfort with PC were associated with significantly better understanding of PC. This may reflect overall progress in integration of PC and oncology care.

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