

MULTIDIMENSIONAL OUTCOMES AMONG PATIENTS SUPPORTED BY SPECIALIST PALLIATIVE CARE SERVICES: A PROSPECTIVE STUDY DONE IN MULAGO NATIONAL REFERRAL HOSPITAL

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Theme: UNITED AGAINST CANCER Prevention to End of Life Care

INTRODUCTION

- Makerere Palliative Care Unit (MPCU) is the only hospital based specialist palliative care (PC) service in Mulago National Referral Hospital(MHRH)
- A novel model of integrated, tiered levels of care with multidimensional approach
- Built capacity of health workers at ward level and offered specialist PC support.



WHY THIS STUDY

- Life-limiting illnesses highly prevalent in Mulago hospital.
- Study revealed 46% of admitted patients had life limiting illnesses with PC needs
- MPCU provides specialist PC alongside intermediate and generalist PC provision.
- Outcomes of model of PC not formally evaluated.

Lewington et al, 2012

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OBJECTIVES

- To determine the outcomes in the physical/psychological domains among patients supported by specialist PC services in Mulago hospital
- To determine the outcomes in the interpersonal domain among patients supported by specialist PC services in Mulago hospital
- To determine the outcomes in the existential domains among patients supported by specialist PC services in Mulago hospital
- To determine the factors associated with above outcomes among patients supported by specialist PC services in Mulago

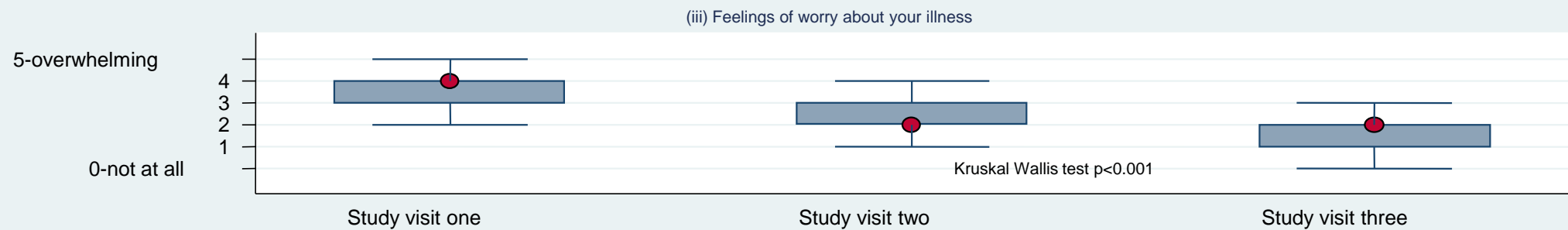
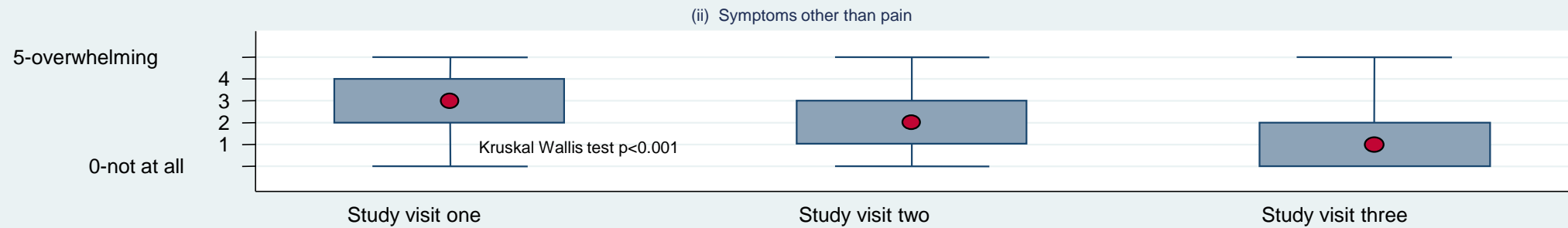
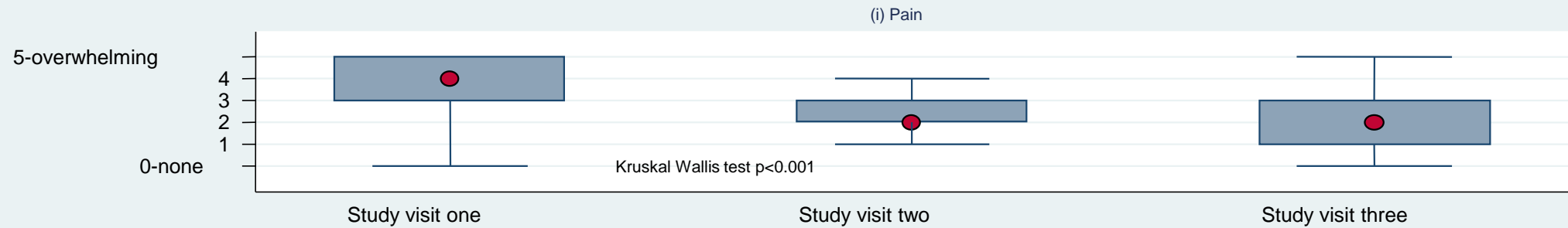
METHODOLOGY

- A prospective study carried out in MNRH
- All eligible participants newly referred to MPCU recruited after consent
- Socio-demographic data and baseline scores for ECOG and the validated APCA African Palliative Outcome Scale (POS) underpinning physical, psychological, interpersonal and existential domains
- Collected on the first visit with reassessment on two consecutive visits three days apart
- The ward teams and MPCU continued to offer joint care

RESULTS

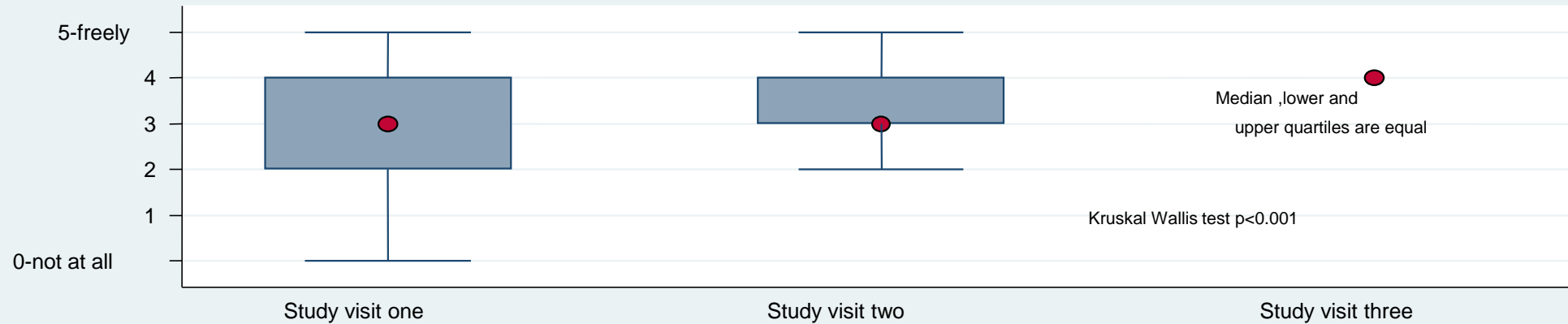
- 120 patients enrolled (117 completed)
- Commonest cancers hepatoceellular (16.7%) cervical (15.8%) and breast (9.2%)
- ECOG Stage 3 and 4 patients accounted for 41.7% and 42.5% respectively
- HIV prevalence was 18.3% with status unknown in 7.6 %.

Outcomes in the Physical/Psychological domain among study patients receiving palliative care at visits one, two and three

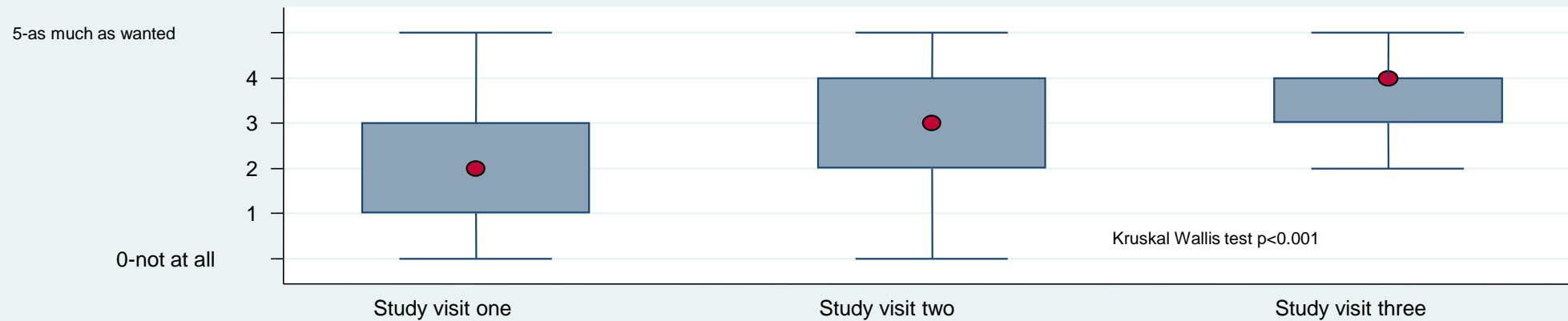


Outcomes in the Interpersonal domain among study patients receiving palliative care at visits one, two and three

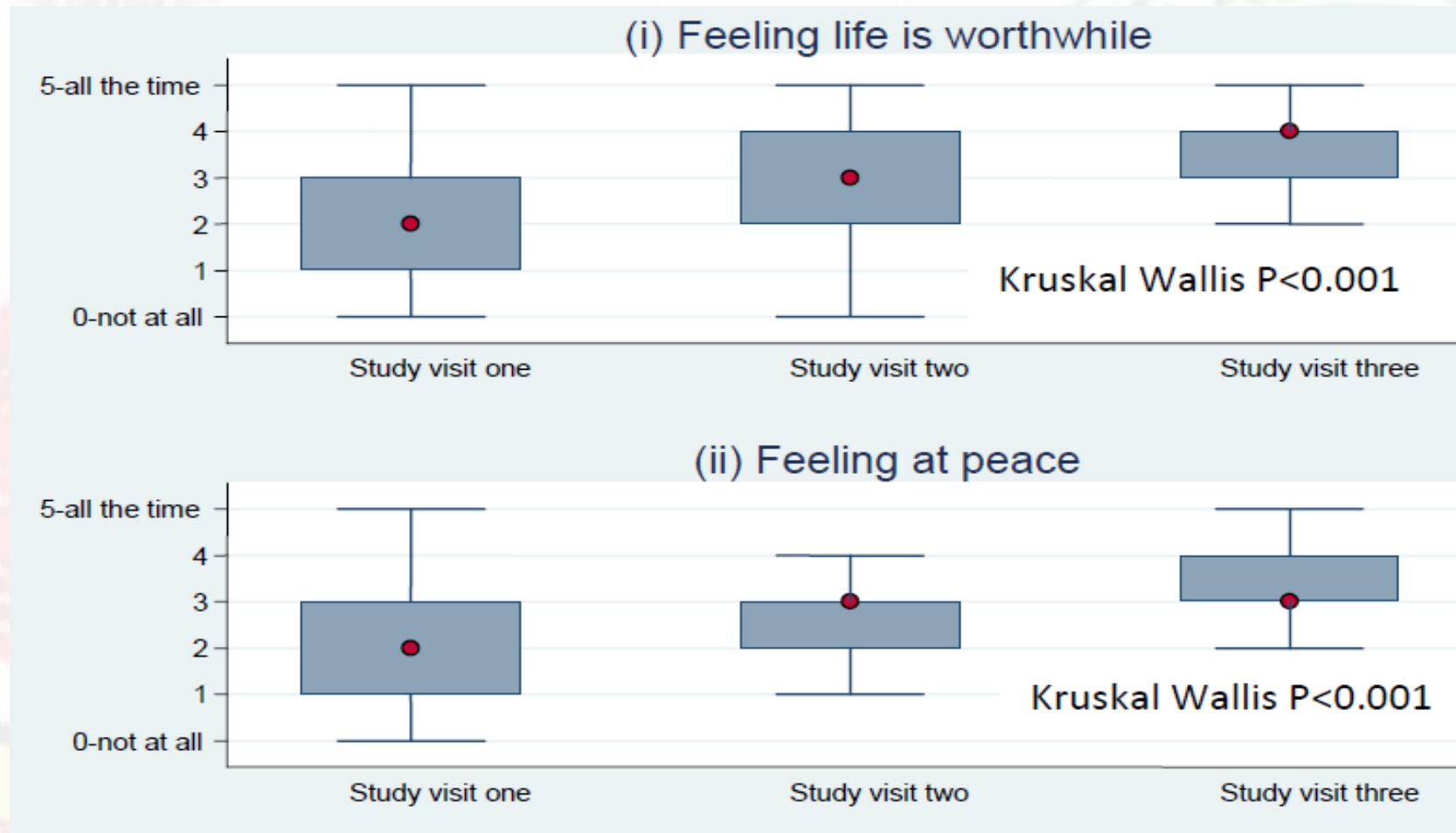
(i) Ability to share feelings are shared with family or family



(ii) Help and advice from your family to plan for the future



Outcomes in the existential domain among study patients receiving palliative care at study visits one, two and three



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CONCLUSION

- Study offers important evidence for this model of PC and emphasizes role of specialist PC in addressing complex needs
- Measurable improvements in multidimensional outcomes using the validated tools demonstrated
- Patients who had worse symptoms or who had advanced disease showed overall poorer outcomes
- PC integration within the hospital was seen across the communicable and non-communicable disease spectrum using a health systems strengthening approach