

# **The Effects of Integrative Palliative Oncology on Hospital Time, Hospice Referrals, and Advanced Care Planning**

Rebecca Sims<sup>1</sup>, Joseph McCollom<sup>2</sup>

<sup>1</sup>Indiana University School of Medicine; <sup>2</sup>Parkview Regional Medical Center, Parkview Cancer Institute

## **Background:**

Integrative palliative oncology incorporates mental, physical, and familial aspects of care into standard cancer treatment. Patients in these programs have access to a doctor, nurse, psychologist, social worker, and chaplain who are all trained in palliative oncology whereas standard oncology does not have this team. Integrative programs improve well-being while reducing futile treatments. We hypothesize that emergency department (ED) visits, inpatient admissions, intensive care unit (ICU) stays, hospital deaths, hospice referrals, and advanced care planning (ACP) are affected by these programs.

## **Methods:**

A retrospective chart review analyzed patients from Parkview Regional Medical Center. Cohort A included 100 patients from a palliative oncology program. Cohort B included 100 patients who received standard oncology care. Cohorts were matched on gender, age, cancer type, and stage. Number of ED visits, ICU admissions, and inpatient stays were analyzed. Hospice referrals, hospital deaths, and ACP documents were also compared.

## **Results:**

A T-test showed no difference between ED visits, ICU stays, or inpatient admissions between cohorts. A chi-square analysis also showed no difference in hospice referrals or hospital deaths. However, there were significantly more ACP documents on file for cohort A ( $p = 0.000132$ ). This suggests that palliative oncology programs do not strongly affect hospital time or hospice referrals but may impact advanced care planning.

## **Conclusion:**

Since the benefits of palliative oncology programs do not seem related to hospital time or hospice care, another factor must be responsible for improving patients' quality of life. These programs emphasize family involvement and planning thus explaining the significant increase in ACP documents. Perhaps this extra support and preparedness also improves patients' moods and well-being.

## **Impact:**

Future studies should involve a larger sample size and focus on psychological aspects of these programs to determine why they benefit patient health, specifically mental health, and what improvements can be made.