





European Union European Social Fund

Hospitalization or Home Care at the End of Life. The Experience in a Greek Home Palliative Care Service

Tserkezoglou A., Katsaragakis S., Amoiridou S., Avgetidou H., Bagiaou O.M., Hamou A., Ikonomou C., Liakopoulos I., Petta E., Raimondou H., Tsiatsouli A., Tsotakos S., Patiraki E. Palliative Care Unit Galilee of Holy Metropolis of Mesogaia & Lavreotiki, Spata, Attica, Greece

Methods: The sample consisted of 237 cancer patients receiving home palliative care Introduction: 'Galilee' palliative care service has from an interdisciplinary team from March 2010 to July 2013. Retrospective data been providing home care for adult cancer patients, in a collection included: demographic and clinical characteristics, patients' ESAS-r (Edmond large suburban area of Athens since 2010. The study was funded by FP 8. Symptom Assessment System Revised) evaluation of symptoms (Likert type 0-10 scale) at the time of referral to the service, 1 (T1) and 2 (T2) months later. SPSS 17.0 was used The **aim** of the study is to explore factors associated for statistical analysis.

with the cancer patients' place of death.

						Patients' Hospital		Detient		
Patients' Demographics & Care Data			Disease Characteristics			Admissions During	Patients' Outcomes			
F	requency			Frequency	Percentage	Home Palliative Care	80% 7		66,7%	
	(N=237)	(%)	Cancer Diagnosis	(N=237)	(%)	70%	70% -			
Sex			Lung	47	19.8	60,8%	60% -			
Female	122	51.5	Gastrointestinal	45	19.0	60% -	50%			
Male	115	48.5	Breast	43	18.1	<u>8</u> 50%-	8 40% -			
Age (mean ± SD) (range) (yea	rs) 67.3	3±12,4 (28-93)	Urinary	33	13.9	ge (%	t 30% -	19,4%		12 00/
ECOG (mean ± SD)		2.8±1.2	Genital	23	9.7	40%- - %0	<u>v</u> 20% -			13,9%
	112		Head-Neck	9	3.8	30%- 22.8%	N 10% -			
ECOG 3-4	142	59.9	Skin	7	3.0	22,8%				
ECOG 2	38	16.0	Brain	7	3.0	20%-	∪/0			
ECOG 0-1	43	18.2	Multiple Myeloma	4	1.7			Living	Death	Discharge
Length of Palliative Home Care 58 (1-1145)		Unknown Primary	3	1.3	10%-3,0%	2,0%		Patients' Outcomes		
(median) (range) (days)	(median) (range) (days)		Sarcoma	3	1,3					
Number of home visits (medi	ian)	13.5 (1-240)	Hematologic	3	1.3	0% None 1 2 3	>4			
(range)			Other	10	4.2	Number of Hospital's Admittions				
Patients' Primary Caregiver			Antineoplasmatic					Patients	' Death Dis	tribution
Husband/Wife	94	39.7	Treatment No	119	50.2		45%	43,0%	over Time	
Child	51	21.5	Antineoplasmatic	119	50.2	Patients' Place of Death	40%			
Other Family member	38	16.0	Treatment			Nursing	35%			
			Chemotherapy	51	21.5	Home;	(%) 30%			22,2%
No Caregiver	14	5.9	Chemotherapy -	21	8.9	Hospital; 5,1%	Percento 20%	19	9,6%	
Mother	9	3.8	Radiotherapy			29,1% Home;	15%		10,8%	
Friends	5	2.1	Radiotherapy	20	8.4	65.8%	10%			4,4%
Social Network	4	1.7	Surgery	12	5.1		5%			
Other	22	9.3	Hormone Therapy	4	1.7		0%		onth 3rd Month 4th of Death per Month	
SD Standard Deviation			Other	10	4.2					

Associations of Patients' Demographic & Clinical Characteristics with the Place of Death

Reason of Last Admission to the Hospital Before Death

Reason of Hospital	Frequency	Percentag
Admission	(N=66)	(%)

Older patients $(x^2(2)=9.67)$, p=0.008) and those with a child or other family member as primary caregiver $(x^{2}(12)=33.4, p=0.001)$ died

Associations of Patients' Responses of Symptoms With Place of Death

	Admission	to Service	1 st Month		
Symptom	x²(df)	P	x²(df)	p	
Pain	4.6(2)	.100	4.2(2)	.124	
Tiredness	3.5(2)	.173	1.7(2)	.424	
Drowsiness	2.7(2)	.263	,6(2)	,732	
Nausea	.3(2)	.863	,5(2)	,765	
Lack of Appetite	2.9(2)	.233	.2(2)	.893	
Shorten of Breath	2.2(2)	.338	1.7(2)	.422	
Depression	1.5(2)	.474	3.9(2)	.136	
Anxiety	3.5(2)	.171	4.7(2)	.097	
Well Being	3.6(2)	.165	1.6(2)	.447	
Constipation	1.7(2)	.431	2.5(2)	0.284	

Health Deterioration	17	25.
Shorten of Breath	12	18.3
Infection/ Fever	10	15.3
Hemorrhage	3	4.5
Tiredness	3	4.5
Diarrhea	3	4.5
Nausea/ Vomiting	3	4.5
Cardiovascular disorder	2	3.0
Anemia	2	3.0
Pain	2	3.0
Other	9	13.



at home. On the other hand patients that died in the hospital had more hospital admissions $(x^{2}(12)=33.4)$, p=0.001). This proved to be true, regardless of the reasons of hospitalization (p=0.496).

Conclusions: Study results highlight that regardless of late referral, a great number of patients were supported to die at home. Further research is needed to clarify reasons of hospitalization at the end of life.

With the co-funding of Greece and the **European Union**



