Terminal Cancer Patients Do Not Receive Appropriate Radiation Therapy

A new analysis has found that a considerable proportion of patients with end-stage or terminal cancer do not benefit from palliative radiation therapy (radiotherapy) despite spending most of their remaining life undergoing treatments. Published early online in CANCER, a peer-reviewed journal of the American Cancer Society, the study indicates that greater efforts are needed to tailor appropriately palliative radiotherapy to patients with end-stage cancer.

Palliative radiotherapy for end-stage cancer patients is intended to control cancer-related pain and other symptoms and to help patients maintain a good quality of life when long-term cancer control is not possible. By reducing the number of cancer cells, palliative radiotherapy can ease pain, stop bleeding, and relieve pressure, even when the cancer cannot be controlled. However, for many patients, the treatments are not effective. In addition, if patients are close to death, they may wish to stop treatments if they would like to die at home.

To investigate the adequacy of palliative radiotherapy in end-stage cancer patients, Stephan Gripp, MD, of the University Hospital Duesseldorf in Germany and colleagues evaluated the treatment of patients who were referred for palliative radiotherapy at their hospital from December 2003 to July 2004 and who died within 30 days. The investigators identified 33 such patients.

Radiotherapy was delivered to 91 percent of patients. Half of the patients spent more than 60 percent of their remaining lifespan on radiotherapy, and in only 58 percent of patients was radiotherapy completed. Many physicians overestimated the length of time their patients would survive. Among this group who died within one month, about one in five physicians predicted more than six months survival. In addition, progressive complaints were noted in 52 percent of patients, and palliation or pain reduction was reported by only 26 percent of patients.

The authors concluded that radiotherapy was not appropriately customized to these cancer patients, many of whom did not benefit despite spending most of their remaining life on therapy. Excessive radiotherapy in end-stage cancer patients may reflect overoptimistic prognoses and unrealistic concerns about radiation damage.

"Radiation oncologists have fallen short in accurately determining the life span of terminally ill cancer patients. This has resulted in unduly prolonged radiation therapy regimens that often go uncompleted due to death or withdrawal from treatment," said Dr. Gripp. He added that physicians need better methods for estimating how long their end-stage cancer patients will live. He also recommended that they use shorter-duration radiation schedules for palliative radiotherapy.

<u>Article:</u> "Palliative radiotherapy tailored to life expectancy in end-stage cancer patients: reality or myth?" Stephan Gripp, Sibylle Mjartan, Edwin Boelke, and Reinhardt Willers. CANCER; Published Online: April 12, 2010 (DOI: 10.1002/cncr. 25112).