

Comparison of Care Strategies and Quality of Life of Advanced Cancer Patients from Four Different Palliative Care Settings

Piyawan Pokpalagon, Somchit Hanucharunkul, Ruth McCorkle, Tassanee Tongprateep, Autchareeya Patoomwan, Chukiat Viwatwongkasem

Abstract: The purpose of this study was to describe and compare palliative care strategies used for quality of life among Thais with advanced cancer who were receiving care from four different settings in Thailand, including: a religious organization; two community hospitals; a university hospital; and, a cancer center hospice. One hundred and eighty Thais who were diagnosed with advanced cancer and receiving treatment in one of four selected settings were recruited to complete a demographic questionnaire, a palliative care assessment form, and the Missoula-VITAS Quality of Life Index.

The results revealed that those who received palliative care in the community hospitals had a significantly higher mean score in regards to all the palliative care strategies used than those in the other settings. With respect to the non-pharmacological palliative care strategies, subjects receiving care at the religious organization (Buddhist temple) had a significantly higher mean score than those receiving care at the university hospital or cancer center hospice, while subjects receiving care at the community hospitals had significantly higher mean scores than those receiving care at the university hospital. Regarding pharmacological palliative care, subjects receiving care at the community hospital had significantly higher mean scores than subjects receiving care in all the other settings. In addition, subjects receiving care at the religious organization, university hospital, and cancer center hospice had significantly higher mean scores, with respect to overall quality of life, than those receiving care at the community hospitals. Also, subjects receiving palliative care at the religious organization, university hospital, and cancer center hospice had significantly higher well-being and transcendent mean scores than those receiving care at the community hospitals. Furthermore, the various organizations were found to be helpful to the subjects and their families, and should be supported by the healthcare policy makers.

Pacific Rim Int J Nurs Res 2012 ; 16(4) 326-342

Key Words: Levels of palliative care services; Quality of life; Advanced cancer

Introduction

Cancer is a major health problem and the leading cause of death in Thailand.¹ Individuals diagnosed with advanced stages of cancer often experience deteriorated physical and psychological health, as well as impaired social and spiritual well-being. Thus, as they deal with their illness, they often receive palliative care for: relief of their symptoms; improvement of their quality of life (QOL); and, social support.

*Correspondence to: Piyawan Pokpalagon, RN, PhD (Candidate) Ramathibodi School of Nursing, Faculty of Medicine Ramathibodi Hospital, Mahidol University, Bangkok, Thailand.
E-mail: pokpalagon@hotmail.com
Somchit Hanucharunkul, RN, PhD. Professor Emeritus, Ramathibodi School of Nursing, Faculty of Medicine Ramathibodi Hospital, Mahidol University, Bangkok, Thailand.
Ruth McCorkle, RN, PhD, FAAN. Professor, School of Nursing, Yale University, New Haven, CT, USA.
Tassanee Tongprateep, RN, DSN. Associate Professor, Kuakarun Faculty of Nursing, University of Bangkok Metropolis, Bangkok, Thailand.
Autchareeya Patoomwan, RN, PhD. Assistant Professor, Ramathibodi School of Nursing, Faculty of Medicine Ramathibodi Hospital, Mahidol University, Bangkok, Thailand.
Chukiat Viwatwongkasem, PhD. Associate Professor, Department of Biostatistics, Faculty of Public Health, Mahidol University, Bangkok, Thailand.*