Early Palliative Care Provides Important Benefits for Family Caregivers of Patients With Cancer

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ASCO Perspective

“Caregivers provide critical support for patients with cancer, but it can take a heavy toll. This study shows that early palliative care, although designed for and directed at patients, can also help ease the burden on their caregivers,” said ASCO President Julie M. Vose, MD, MBA, FASCO, ASCO President. “This insight contributes to the large and growing body of evidence supporting early palliative care for patients with advanced cancers.”

ALEXANDRIA, Va. – A randomized clinical trial found that introducing palliative care shortly after a cancer diagnosis results in better quality of life and fewer depression symptoms for family caregivers. According to the authors, the study is the first to show that early palliative care alone for a patient with cancer can have a strong impact on family caregivers. The study was featured in a press briefing today and will be presented at the 2016 American Society of Clinical Oncology (ASCO) Annual Meeting in Chicago.

“This study suggests that early palliative care creates a powerful positive feedback loop in families facing cancer,” said lead study author Areej El-Jawahri, MD, Director of Bone Marrow Transplant Survivorship Program at Massachusetts General Hospital Cancer Center. “While patients receive a direct benefit from early palliative care, their caregivers experience a positive downstream effect, which may make it easier for them to care for their loved ones.”
The study included 275 family caregivers for patients newly diagnosed with incurable lung and gastrointestinal cancers. This analysis was part of a trial in which patients were randomly assigned to receive early palliative care integrated with standard oncology care, or standard oncology care alone.

Family caregivers were defined as a relative or friend identified by the patient as the primary caregiver. They were evaluated at enrollment, and again at 12 and 24 weeks using standard questionnaires for quality of life (Medical Outcomes Study Health Survey Short Form-36) and mood (Hospital Anxiety and Depression Scale). These tests provide numerical measures of physical and mental well-being that can be tracked and compared over time.

**Key Findings**

At 12 weeks, caregivers of patients receiving palliative care reported significantly lower depression symptoms. Vitality and social functioning improved for caregivers of patients receiving early palliative care but decreased for caregivers of patients receiving standard care. At 24 weeks, caregivers of patients assigned to early palliative care continued to report fewer depression symptoms, but no statistically significant difference was observed in the other measures.

Caregivers in the study did not receive any targeted interventions and were not required to accompany patients to palliative care appointments. According to the authors, this suggests that some of the observed benefits in quality of life and mood were indirect consequences of improvements in patient outcomes. The researchers are conducting additional analyses to better understand this effect.

**Related Data**

A separate analysis of the impact of early palliative care on patients in this study will also be presented at the ASCO Annual Meeting. It found early integration of palliative care with standard treatment was associated with improved patient quality of life, decreased depression, and more frequent end-of-life discussions.

This study received funding and support from the National Institutes of Health.

**View the full abstract.**

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