

Palliative Care For Patients With Non-Small Cell Lung Cancer (PE3-16)

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Background

Lung cancer is cancer that forms in the lungs. This cancer is one of the most common cancers. Globally, lung cancer is the first cause of cancer death in men and the second leading cause of cancer death in women. It is estimated that by 2030, 26 million people will die from cancer. Non-Small Cell Lung Cancer (NSCLC) is the most common lung cancer accounting for about 80% of all lung cancers. Nurses' knowledge and attitudes regarding palliative care, especially in lung cancer patients, are needed in reviewing and explaining patient complaints so that they can develop and implement comprehensive care to improve the quality of life of patients.

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Aim

The aim of this study was to determine how quality palliative care in patients with lung cancer is in accordance with relevant nursing diagnoses.

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Method

The research method used is a literature review approach by using several sources of journals or articles selected based on predetermined criteria used in this study. The process of searching for the journal literature was taken from electronic-based indexes such as Google Scholar, PubMed, ProQuest, and Ebsco. The criteria for the inclusion of articles was that they were published from 2012-2022. The keywords used are "Lung cancer", "Palliative care", and "Non–small-cell".



Results

Patients assigned to early palliative care had a better quality of life than patients assigned to standard care. In addition, fewer patients in the palliative care group than in the standard care group had depressive symptoms. Despite the fact that fewer patients in the early palliative care group than in the standard care group received aggressive end-of-life care median survival was longer among patients receiving early palliative care.

Conclusion

Among patients with metastatic non-small-cell lung cancer, early palliative care led to significant improvements in both quality of life and mood. As compared with patients receiving standard care, patients receiving early palliative care had less aggressive care at the end of life but longer survival.