

Where Do Our Palliative Care Patients Die ?

Fiona Lian¹, Cindy Teoh², CT Leong¹, IS Tai², YL Woon¹

¹ Center for Clinical Epidemiology, Institute for Clinical Research

² Palliative Care Unit, Hospital Selayang

Correspondence email: fiona@crc.moh.gov.my

INTRODUCTION

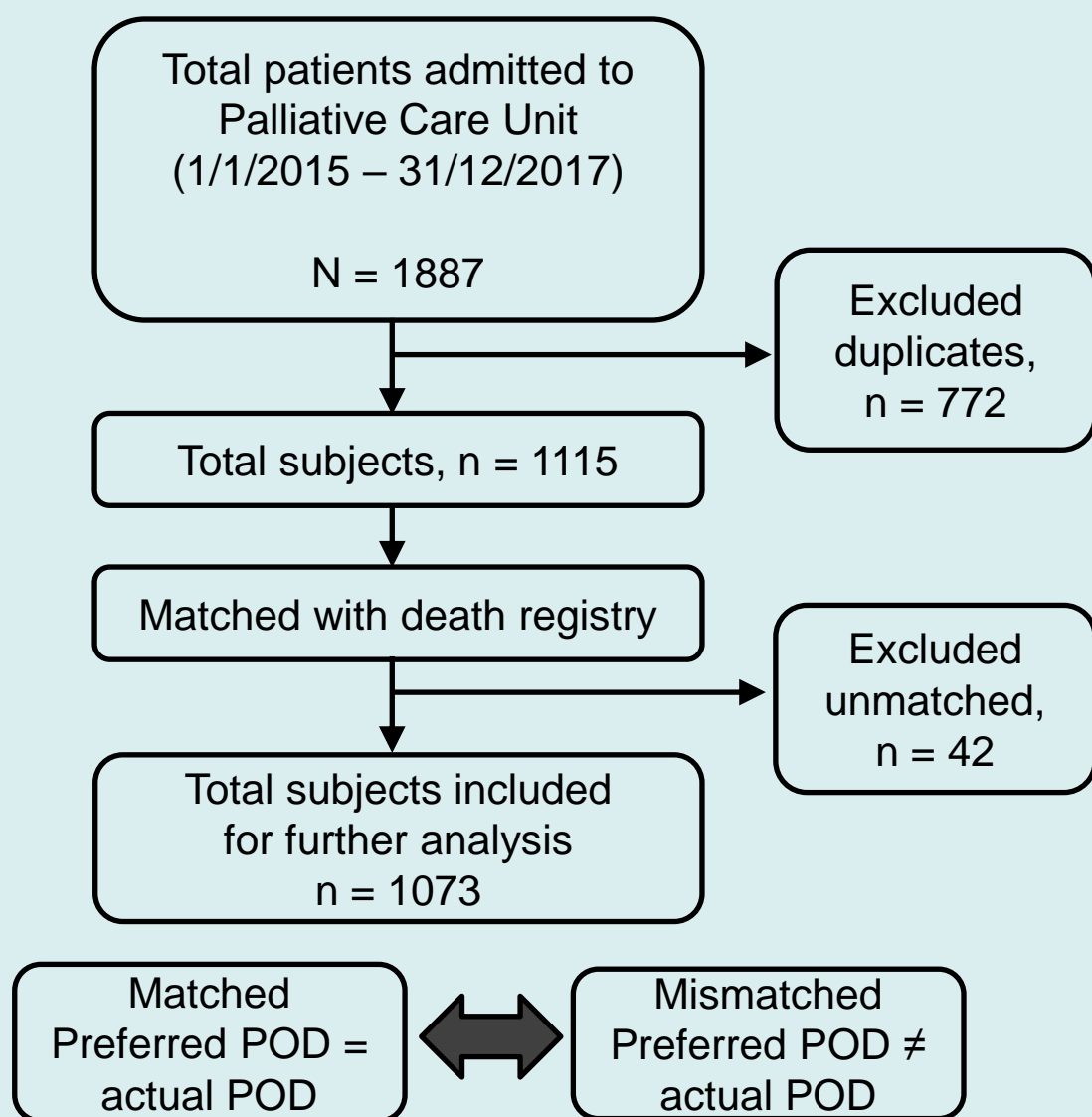
Palliative care essentially centralises in allowing a “good death” which revolves around having a patient-focused preference in the dying process.¹

Home and hospice were the topmost on patients’ preference for place of death.² Literature showed 10-70% of patients were unable to die in their preferred place of death.^{3,4} However, this statistic remains unknown in Malaysia.

It is crucial to understand patients’ preferences for place of death and support them accordingly. This study aim to understand and compare the preferred and actual place of death (POD) of palliative care patients.

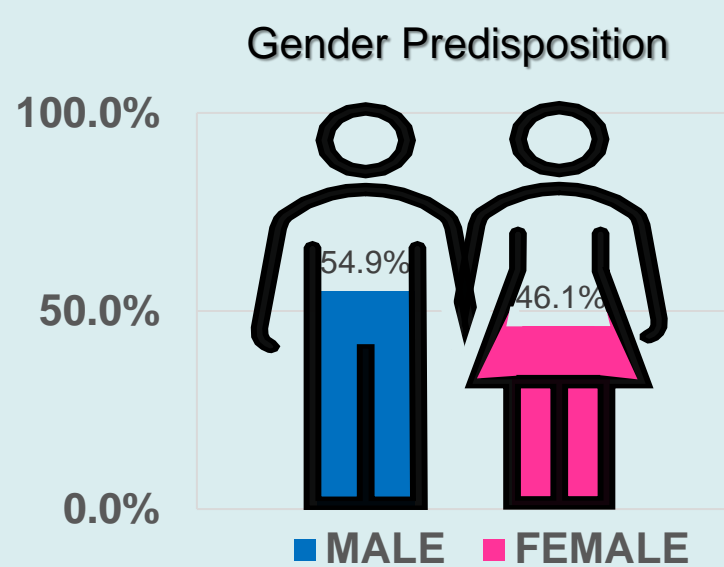
METHODOLOGY

This is a cross-sectional study of patients admitted to Palliative Care Unit, Hospital Selayang between 01/01/2015 and 31/12/2017. Socio-demographic, clinical characteristics and information of preferred place of death were extracted from hospital medical records. The list of patients was matched with death registry to obtain the information on actual place of death.



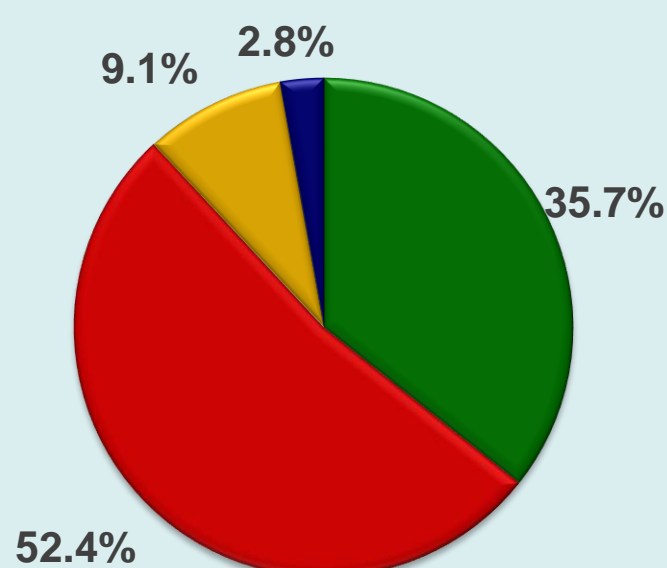
RESULTS

A total of 1115 patients were identified, with 1073 (96.2%) successfully matched with death registry and included for further analysis. Mean age was 62.8 ±13.7 years old.

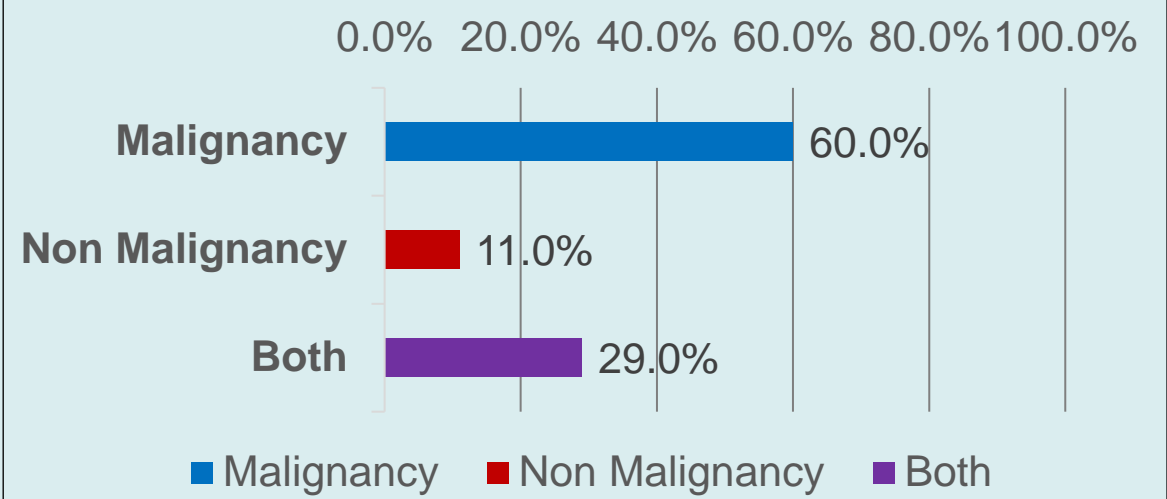


Ethnicity

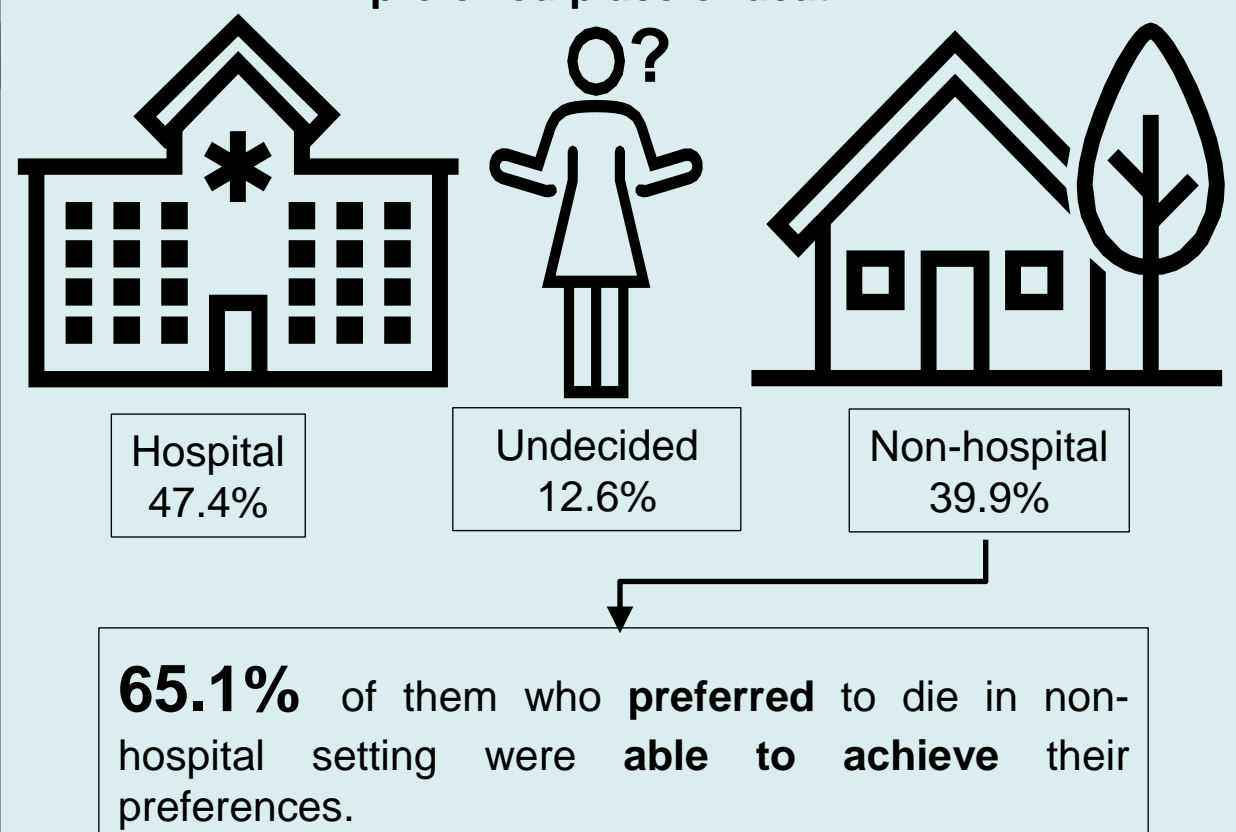
- Malay
- Chinese
- Indian
- Others



Diagnosis on Referral



Among 696 (64.9%) patients with documented preferred place of death



Overall, the rate of patients who had mismatched place of death was 17.1%.

DISCUSSION / CONCLUSION

Malaysians had a lower preference towards non-hospital deaths compared to other countries. This can be due to many factors, including availability of hospice care, environmental, culture, psychosocial and many more.^{3,4} Further studies are needed to elucidate the reasons for the low preference among end-of-life care patients to die at non-hospital setting.

In our study, the rate of mismatched place of death is low. However, this can be further improved by understanding patient’s preference for the place of death. In many countries, enquiry into patients’ preferences for the place of death is included into health guidelines and policy of many countries.^{5,6} This is because it is found to be an objective, measurable and patient-centered outcome indicator.⁷

We hope that the study results can support the palliative care team in their strategic planning to improve palliative care service in our country.

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REFERENCES

- Meier, E. A., Gallegos, J. V., Montross-Thomas, L. P., Depp, C. A., Irwin, S. A., & Jeste, D. V. (2016). Defining a Good Death (Successful Dying): Literature Review and a Call for Research and Public Dialogue. *American Journal of Geriatric Psychiatry*, 24(4), 261–271. <https://doi.org/10.1016/j.jagp.2016.01.135>
- Arnold, E., Finucane, A. M., & Oxenham, D. (2015). Preferred place of death for patients referred to a specialist palliative care service. *BMJ Supportive and Palliative Care*, 5(3), 294–296. <https://doi.org/10.1136/bmjspcare-2012-000338>
- Billingham, M. J., & Billingham, S. J. (2013). Congruence between preferred and actual place of death according to the presence of malignant or non-malignant disease: A systematic review and meta-analysis. *BMJ Supportive and Palliative Care*, 3(2), 144–154. <https://doi.org/10.1136/bmjspcare-2012-000292>
- Brogaard, T., Neergaard, M. A., Sokolowski, I., Olesen, F., & Jensen, A. B. (2013). Congruence between preferred and actual place of care and death among Danish cancer patients. *Palliative Medicine*, 27(2), 155–164. <https://doi.org/10.1177/0269216312438468>
- Department of Health. (2008). End of Life Care Strategy – Promoting high quality care for all adults at the end of life. *Department of Health*, (July), 171. <https://doi.org/10.1089/cap.2005.15.996>
- The Scottish Government. (2008). Living and Dying Well: a national action plan for palliative and end of life care in Scotland. *Edinburg: The Scottish Government*, 1–46. <https://doi.org/10.1007/s10973-009-0456-y>
- De Roo ML, Miccinesi G, Onwuteaka-Philipsen BD, Van Den Noortgate N, Van den Block L, et al. (2014) Actual and Preferred Place of Death of Home-Dwelling Patients in Four European Countries: Making Sense of Quality Indicators. *PLOS ONE* 9(4): e93762. <https://doi.org/10.1371/journal.pone.0093762>