

PERCEPTION OF CURABILITY AMONG ADVANCED CANCER PATIENTS RECEIVING PALLIATIVE CARE AROUND THE WORLD

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Background/Aims: There is limited data on the illness understanding and perception of cure among advanced cancer patients (ACP) receiving palliative care around the world. The aim of the study is to determine the frequency and factors associated with perception of cure in countries in North America, South America, Europe, Asia and Africa.

Methods: This study is the secondary analysis of a larger study to determine the decisional control preferences in developed and developing countries. ACP receiving palliative care were surveyed to assess the patients understanding of illness and decisional control preferences using a validated scales including understanding of illness questionnaire. Descriptive statistics and Logistic regression analysis was performed.

Results: A total 1259 ACPs were evaluated. The median age was 58, 55% were female, 63% were married, 50% were catholic, 40% were educated college or higher degree. 686/1259 (54%) reported that their cancer is curable and 68% felt the goals of therapy was to get rid of their cancer and 96% felt that the goals if the therapy was to make them feel better. 60% felt they were relatively healthy, and 49% felt they were seriously ill. Logistic regression analysis after correcting for education suggest that Karnofsky performance status (OR 1.02, $p < 0.001$), and ACP's belonging to Asian countries (OR 4.68, $p < 0.001$) and South America (OR 1.77, $p = 0.009$) were more likely to have a perception of curability. Age, gender, cancer type religion and decision control preferences were not significantly associated with perception of curability.

Conclusion: ACP's receiving palliative care in Asia and South America have a high odds of perception that their cancer is curable. Integration of Palliative/Supportive Care can be more complex in these patients. Further studies are needed to develop strategies (in regards to patient-doctor communication) to reduce this misperception so as have early integration of palliative care.