

Review Article

Prevalence of Symptoms in Older Cancer Patients Receiving Palliative Care: A Systematic Review and Meta-Analysis

Aurélié Van Lancker, MSc, RN, Anja Velghe, MD, Ann Van Hecke, PhD, RN, Mathieu Verbrugghe, MSc, Nele Van Den Noortgate, MD, PhD, Mieke Grypdonck, PhD, RN, Sofie Verhaeghe, PhD, RN, Geertruida Bekkering, PhD, and Dimitri Beeckman, PhD, RN

Nursing Science (A.V.L., A.V.H., M.V., M.G., S.V., D.B.), Department of Public Health, Faculty of Medicine and Health Sciences, Ghent University, Ghent, Belgium; Department of Geriatric Medicine (A.V., N.V.D.N.); and Nursing Science (A.V.H.), University Hospital Ghent, Ghent, Belgium; and Belgian Interuniversity Collaboration of Evidence-Based Medicine (BICEP) (G.B.), Belgian Center for Evidence-Based Medicine, Catholic University of Leuven, Leuven, Belgium

Abstract

Context. Symptom control is an essential part of palliative care and important to achieve optimal quality of life. Studies showed that patients with all types of advanced cancer suffer from diverse and often severe symptoms. Research focusing on older persons is scarce because this group is often excluded from studies. Consequently, it is unclear which symptoms older palliative care patients with cancer experience and what is the prevalence of these symptoms. To date, no systematic review has been performed on the prevalence of symptoms in older cancer patients receiving palliative care.

Objectives. The objective of this systematic review was to search and synthesize the prevalence figures of symptoms in older palliative care patients with cancer.

Methods. A systematic search through multiple databases and other sources was conducted from 2002 until April 2012. The methodological quality was evaluated. All steps were performed by two independent reviewers. A meta-analysis was performed to pool the prevalence of symptoms.

Results. Seventeen studies were included in this systematic review. Thirty-two symptoms were identified. The prevalence of these symptoms ranged from 3.5% to 77.8%. The most prevalent symptoms were fatigue, excretory symptoms, urinary incontinence, asthenia, pain, constipation, and anxiety and occurred in at least 50% of patients.

Conclusion. There is a high degree of uncertainty about the reported symptom prevalence because of small sample sizes, high heterogeneity among

Address correspondence to: Aurélié Van Lancker, MSc, RN, Nursing Science, Department of Public Health, Faculty of Medicine and Health Sciences, Ghent University, UZ 2 Blok A, De Pintelaan 185, 9000

Ghent, Belgium. E-mail: Aurelie.VanLancker@UGent.be

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studies, and the extent of instrument validation. Research based on rigorous methods is needed to allow more conclusive results. *J Pain Symptom Manage* 2014;47:90–104. © 2014 U.S. Cancer Pain Relief Committee. Published by Elsevier Inc. All rights reserved.

Key Words

Elderly, aged, older person, palliative care, signs and symptoms, systematic review, prevalence

Introduction

In 2008, the estimated incidence of cancer was 12.7 million cases internationally,¹ of which 3.2 million cases were in Europe.² Because aging is a fundamental risk factor for cancer development,³ the number of cancer cases will continue to increase as a result of the growing aging population in the west.⁴ Cancer remains a leading cause of death, accounting for 13% and 20% of all deaths worldwide¹ and in Europe, respectively.² These prevalences indicate that, for a certain number of patients, the focus of treatment will eventually shift from cure to care. Therefore, many authors have recommended the integration of palliative care with cancer care and that this is done in the early stage of illness.^{5,6}

Symptom control is an essential part of palliative care and important to achieve optimal quality of life.³ Studies showed that patients with all types of advanced cancer suffer from diverse and often severe symptoms. Two systematic reviews^{7,8} of patients of all ages with advanced cancer identified between 11 and 56 different symptoms. Teunissen et al.⁸ reported that the most prevalent symptoms were fatigue, pain, lack of energy, weakness, and appetite loss, occurring in more than 50% of patients with advanced cancer. Moreover, as the number of symptoms and their severity increases, the quality of life for patients decreases.⁷ Despite the high prevalence of symptoms, many patients remain untreated.⁹ Research focusing on older persons is scarce because older people are often excluded from studies.^{10,11} Despite the fact that the majority of older people are aging well, the incidence of frail older persons with complex and multiple chronic pathologies and disabilities is increasing.¹² Therefore, results from studies in younger persons cannot always be extrapolated to the older person.¹³ Consequently, it is unclear which symptoms older palliative

care patients with cancer experience. To date, no systematic review has been performed on the prevalence of symptoms in older cancer patients receiving palliative care.

Aim

The aim of this systematic review was to search and synthesize the prevalence figures of symptoms in older palliative care patients with cancer. The following questions were addressed: 1) which symptoms do older palliative care patients with cancer experience? and 2) what is the point prevalence of the identified symptoms in this population?

Methods

Review Protocol

The review protocol, which details the pre-defined criteria for this review, is available from the authors and Joanna Briggs Institute (<http://www.joannabriggs.edu.au/>).

Search Strategy

Multiple steps were undertaken to identify all relevant literature. First, an initial limited search of PubMed and CINAHL was carried out to define the appropriate index terms and key words. Second, a subsequent search was undertaken across the following electronic databases: PubMed, Embase, CINAHL, Web of Science, and the Cochrane Library. The concepts, using identified index terms and key words, were combined as follows: “palliative” AND “symptoms” AND “prevalence” AND “cancer” AND “older person.” Third, Google Scholar was searched to identify grey literature. Fourth, a hand search through the tables of content of relevant journals (*Journal of Pain and Symptom Management*, *Palliative and Supportive Care*, *Journal of Palliative Medicine*, *Supportive Care in Cancer*, *Critical Review in Oncology*, and

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