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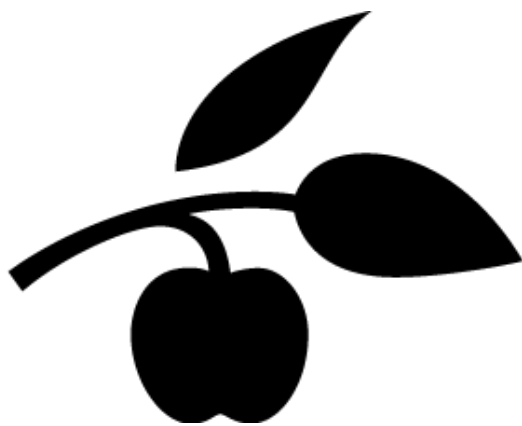
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End-of-life anticancer treatment. A Nationwide registry-based study

Thea O Mattson^{1&2}, Anton Pottegård³, Trine L Jørgensen^{1&2}, Anders Green⁴, and Mette Bliddal⁴

1) Department of Oncology, Odense University Hospital, Odense, Denmark

2) Academy of Geriatric Cancer Research (AgeCare), Odense University Hospital, Odense, Denmark

3) Clinical Pharmacology and Pharmacy, Department of Public Health, University of Southern Denmark, Odense, Denmark

4) OPEN – Open Patient data Explorative Network, Department of Clinical Research, University of Southern Denmark, and Odense University Hospital, Denmark

Background and purpose

Anticancer treatments near the end of a patient's life should generally be avoided, as it leaves the patient with no significant anticancer effect but increases the risk of severe side effects. We describe the magnitude of all anticancer end-of-life treatment and to identify subpopulations of patients more likely to receive anticancer treatment at the end of their life and their specific characteristics.

Methods

Using the nationwide Danish registries, we identified a cohort of all Danish cancer decedents with a solid tumor from January 1st, 2010 to December 31st, 2015 and described their end-of-life anticancer treatment (chemotherapies, hormone and anti-hormone therapies, immunotherapies and targeted therapies) in regard to sex, age, type of cancer, comorbidity, place of death, and calendar year within 30 days prior to death. We used adjusted odds ratios with 95% confidence intervals to identified factors associated with receiving end-of-life treatment.

Results

A total of 43,136 cancer patient in risk of anticancer treatment died during 2010-2015. Of these, 14.3% received a least one anticancer treatment within the last 30 days of life and the proportion was stable over time (Figure 1). Chemotherapy was by far the most frequent used treatment (75%). The highest proportion of patients being treated was found in patients diagnosed with breast cancer (26.9%) follow by malignant melanoma of the skin (22.9%) and pancreatic cancer (21.9%). There was an adverse trend of being treated with increasing age from 0.89 (95% CI 0.75-1.04) in 45-59 years old to 0.12 (95% CI 0.07-0.19) compared to patients aged 18-44 years (Figure 2). Being hospitalized by time of death was strongly associated with end of life treatment.

Conclusions

A stable 14% of patients dead with a cancer and in contact to a department of clinical oncology were treated with anticancer treatment, mostly frequently chemotherapy, within the last 30 days of life.

Figure 1 – Frequency of end-of-life treatment Denmark, 2010-2015.

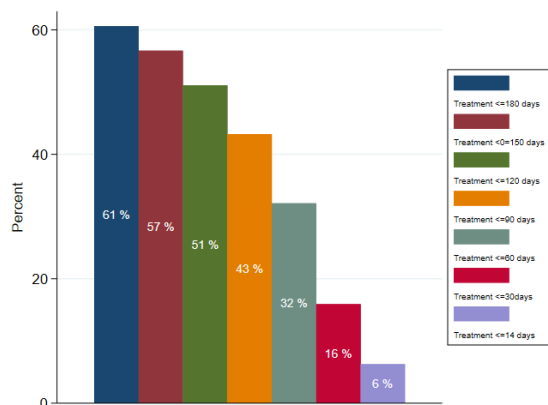


Figure 2 – Forest plot of odds ratios (OR) with 95% confidence intervals (95% CI) for risk of receiving end of life treatment according to sex, age, cancer type, Charlson Comorbidity Index, year of death, and time to death from diagnosis, mutually adjusted. Plotted on a logarithmic scale.

