

Title: Gender-specific unmet need of palliative care in patients with cancer in India: an analysis of data from National Cancer Registry Program Report 2020.

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Introduction: India has a massive and continuously increasing burden of cancer. The World Health Organization recognizes palliative care under the human right to health. Despite this, less than 4% of people requiring palliative care have access to it necessitating a need to scale it up.

Aim: To calculate the unmet need for palliative care in patients with cancer for the scale-up of services.

Methods: As India is a resource-limited country, we propose that the initial focus should be to scale up services to provide at least all patients with stage 4 disease with palliative care. The unmet need for palliative care was calculated for these patients by subtracting the number of patients receiving palliative care for stage 4 cancer from the total disease burden for the same. Data was extracted from the Report of National Cancer Registry Programme 2020.

Results: Out of 20,753 people with stage 4 disease, 19,348 (98.4%) did not receive palliative care. The unmet need was 98.2% and 98.6% for males and females, respectively. Cancer tongue, hypopharynx, nasopharynx, and oropharynx have a 100% unmet need in females. Cancer nasopharynx and hypopharynx have a 100% unmet need in males. The least unmet need for females and males was seen for stomach cancer at 96.4% and 96.27%, respectively.

Conclusions: The unmet need for palliative care in India requires urgent attention. Future studies should look at geographical variations in access to palliative care to promote region-specific interventions.



Gender-specific unmet need of palliative care in patients with cancer in India: an analysis of data from National Cancer Registry Program Report 2020.

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Introduction

WHO recognizes palliative care under the human right to health and it is an integral part of UHC. Globally, only 14% of people receive palliative care with cancers being the single largest group.¹ The need for palliative care is expected to double by 2060.² This necessitates a scale up of services.

Aim: To calculate the unmet need for palliative care in patients with cancer for such a scale-up.

Methods

Study design: Retrospective cross-sectional study.

Data source: Report of National Cancer Registry Programme (NCRP) 2020.

Data variables: Total disease burden of stage 4 cancer (10 cancers) and number of people receiving palliative care for the same.

We estimated the unmet need for distant metastatic cancer, following American Society of Clinical Oncology's (ASCO) recommendation.³

Analysis:

Unmet need = total burden of stage 4 cancer - no. of people receiving palliative care for stage 4 cancer.

% unmet need = (unmet need/ total burden of stage 4 cancer) × 100

Results

Cancer-Wise Differences in Unmet Need for Palliative Care Across Gender



Out of 20,753 people with stage 4 disease, 19,348 (98.4%) did not receive palliative care.

The unmet need was 98.2% and 98.6% for males and females, respectively.

The least unmet need for females and males was seen for stomach cancer at 96.4% and 96.27%, respectively.

Discussion

There is a significant high unmet need for palliative care in stage 4 cancer. It is imperative that the palliative services be scaled up to catch up with the rising burden of cancer.

Limitations: Firstly, we lacked access to region-wise data to understand region-wise unmet need. Lastly, we have analysed the unmet need for only stage 4 cancers.

Future recommendations: Studies should look at geographical variations in access to palliative care to promote region-specific interventions. Include a wider panel of types of cancer stages and other chronic diseases.

References

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- 3 Ferrell BR, Temel JS, Temin S, et al. Integration of palliative care into standard oncology care: american society of clinical oncology clinical practice guideline update. *JCO*. 2017;35(1)