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Early access to rapid onset opioids therapy in advanced cancer patients can affect their death place?

The end stage cancer disease is often associated with severe pain¹; Break Through cancer Pain is particularly represented in these conditions,² and the preferred therapy for this type of pain is using the “rapid Onset Opioids” (ROOs).³

This category of patients prefer to die at home⁴ or in hospice.

We hypothesized that an early access to ROOs therapy for Break Through cancer Pain might be associated with a minor probability of having the hospital as a place of death in these patients.

A retrospective study was conducted reporting the place of death (hospital, assisted health care, home, hospice, other) of cancer patients (with diagnosis code of malignant tumor ICD IX-CM 140-208) in the Region Friuli Venezia Giulia (FVG), Italy, between 2011 and 2014 year.

For each patient the date of the first ROOs prescription was registered dividing them in 3 groups; patients with ROOs prescription in the last 12 months of life, in the last 3 months of life, and in the last 15 days of life.

The data of 16,992 patients who died between 2011 and 2014 year in Region Friuli Venezia Giulia were registered. Of those patients 3011 died at home, 9324 in acute hospital, 3339 in hospice, 1182 in assisted health care, and 136 in other settings.

It was observed (see Fig 1) that patients having access to ROOs manifested higher tendency to die at home or in hospice compared to other groups of patients (Chi square test with $P < 0.001$).

Early access to ROOs therapy deriving from a major attention to pain symptom treatment in terminal cancer patients might hence play a positive role in the appropriateness of place of death; those patients might benefit from care and attentions in home or hospice settings that are on the other hand difficult to deliver in acute hospitals or other settings.

Patients choosing as a place of death domiciliary and hospice setting can allow a rational use of the economical public resources.

In conclusion authors give evidence that early onset of opioid therapy for pain relief in terminally ill cancer patients may be helpful and patients may like to stay at home in last days of life.

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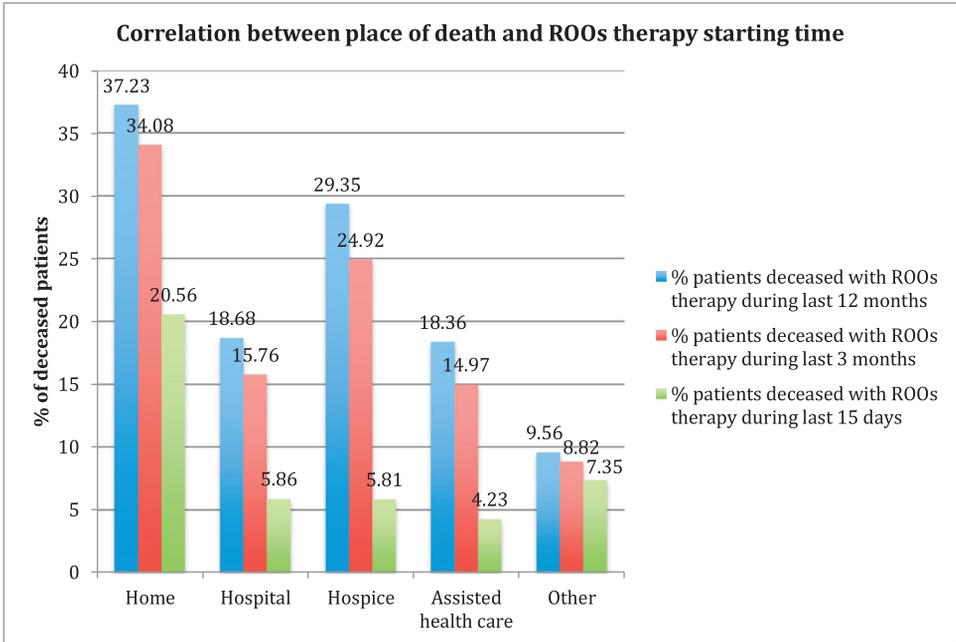


Fig. 1. Correlation between place of death and ROOs therapy starting time.

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