

November 16, 2010, 1:54 PM ET

Surprising Variations in End-of-Life Care

A new report by researchers at the Dartmouth Atlas Project found that in the U.S., 29% of patients with advanced cancer died in hospitals and intensive-care units. The study is likely to fuel ongoing discussions about aggressive treatments for dying patients.

The report, which was published on Tuesday and is available at www.dartmouthatlas.org, looked at the records of a little over 235,000 Medicare patients who were age 65 or older with advanced cancer who died between 2003 and 2007. The researchers then compared end-of-life care across different regions, states and hospitals. Some of the things they looked at included admissions to ICUs, whether chemotherapy was used in the last two weeks of life, and whether patients received aggressive treatments such as feeding tubes or CPR.

About 6% of patients received chemo within the last two weeks of life, although in some places it was as high as 10%. Admissions to ICUs also varied dramatically. More than 40% of cancer patients were admitted to intensive care in their last month of life in Huntsville, Ala., whereas only 6% of advanced cancer patients in Mason City, Iowa, were admitted.

The report found that in at least 50 academic medical centers, less than half of the patients with advanced cancer received hospice services. In some cases, referrals to hospice came within a few days of the person's death.

David C. Goodman, the lead author and co-principal investigator for the Dartmouth Atlas Project, tells the Health Blog that the results show that "care for patients with advanced cancer largely depends on where they happen to receive care." He added that he'd like to see doctors engaging patients early on in conversations "where they can express their preferences" about treatment.

The report comes at a time when policy makers, doctors and researchers are discussing end-of-life care, which is extremely expensive. The American Society of Clinical Oncology, the national group of oncologists, is developing guidelines to help doctors talk with patients earlier in the treatment process about palliative care, which can be used alongside conventional treatments but focuses on reducing pain and symptoms. It can also include hospice care.

The Pittsburgh Regional Health Initiative said it is starting a new program called Closure (www.closure.org) to bring together doctors, nurses, clergy, caregivers and others to talk about end-of-life issues, including questions to ask your doctor.

Some of the new attention is driven by research like a 2010 study published in the New England Journal of Medicine, which found that newly diagnosed patients with advanced lung cancer who got chemotherapy and palliative care lived longer and had a higher quality of life than patients who got only chemotherapy.

Copyright 2008 Dow Jones & Company, Inc. All Rights Reserved

This copy is for your personal, non-commercial use only. Distribution and use of this material are governed by our [Subscriber Agreement](#) and by copyright law. For non-personal use or to order multiple copies, please contact Dow Jones Reprints at 1-800-843-0008 or visit www.djreprints.com