Discussing End-of-Life Care May Boost Hope for People With Advanced Cancer

Doctors are often reluctant to bring up advance care planning for people with advanced cancer, but doing so may increase optimism.

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People with cancer who engage in advance care planning (ACP)—discussing their desires regarding medical care in the event that they become incapacitated—are no less optimistic about their chances of survival than those who do not, according to a new study presented at the American Society of Clinical Oncology (ASCO) 2021 Annual Meeting.

In fact, they may become more hopeful.

Doctors and other medical professionals are often reluctant to initiate ACP because they believe that it could be demoralizing to patients. They do not want to appear as though they are giving up hope, according to the study abstract. Those fears, however, may be unfounded.

As part of the study, researchers at the University of Pittsburgh conducted a secondary analysis of a randomized controlled trial involving 672 people with advanced cancer who were in primary palliative care to determine the impact of ACP on their level of hope. ACP was defined as either having had a conversation about end-of-life (EOL) care or having completed an advance directive or living will. Of the 672 patients, 36% had lung cancer, 20% had gastrointestinal cancer and 16% had breast cancer or gynecological cancer.

At the beginning of the study, 294 individuals reported having had an EOL conversation; 111 reported having an EOL conversation within three months of the study's start. The researchers determined ACP status with a validated questionnaire and hope level using the Herth Hope Index, a common scale.

The results demonstrated that participants who had had an EOL conversation were no less hopeful than participants who had not had one. When adjusted for factors known to influence ACP status and hope level, including age, religiosity, education, symptom burden and socioeconomic status, however, the results suggested that participants who had had an EOL conversation were significantly more hopeful than participants who had not. The same was true of the participants who had completed an advanced directive.

In these data, “a trend toward engaging in ACP being associated with increasing hope” is evident, said Michael G. Cohen, MD, a graduate medical fellow in gynecologic oncology at the University of Pittsburgh Medical Center Magee-Womens Hospital and a coauthor of the study, according to the ASCO Daily News, the official conference publication.

Providers, he added, “may be able to feel more reassured in having these conversations because they are not going to jeopardize hope; they are not going to be seen as giving up hope on their patients.”

To learn more, see “Can Algorithms Nudge Oncologists to Have Better Conversations?” and “The New Palliative Care.” And to read about one man’s personal experience discussing the topic with friends and family members, read “The Benefit of Death Talk.”

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