Prognostic awareness in terminal cancer patients: a secondary data analysis of IMPAC study

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BACKGROUND

Prognostic awareness (PA) relates to patients´ capacity to understand the terminal nature of the disease and their life expectancy. PA influences patients´capability to participate in decision making process. Previous studies showed that around 25 % of patients with advanced cancer are usually completely aware of their prognosis which is associated with worse quality of life (QoL).

AIM

The aim of this study was to compare prognostic awareness of patients at the end of life with prognostic awareness of patients with advanced cancer who had better survival.

METHODS

IMPAC was a multicentre longitudinal cohort study (data were collected during 9 months in 3 waves) in patients with advanced cancer (assessed by 12-months surprise question). PA was measured by: Terminal Illness Acknowledgment Tool, a question about goals of treatment and estimation of patients´ chance to be cured using a percentage scale. Patients were perceived as prognostically aware if they answered all questions correctly, partially aware if they answered 2 or 1 questions correctly. QoL was assessed using Integrated Palliative Outcome Scale (IPOS). The complete methodology of this study and the main results are described elsewhere (Loucka et al., 2021). Secondary data analysis was conducted on a subsample of patients who died during the study. Differences in PA were assessed using Cramer´s V and associations with QoL were tested with ANOVA.

Prognostic awareness

RESULTS

134 patients were recruited and only 16 % of them were considered as completely aware of their status. Almost half (46 %) of the sample died during the study. On their last measurement, 24 % of patients who died later in the study were completely aware of their prognosis compared to 11 % of aware patients who did not die during the study.

Worse quality of life was significantly associated with accurate PA in the whole sample (N= 134; p= 0.02) but in the subgroup of patients who died worse QoL at their last measurement was not associated with accurate PA (p= 0.278).
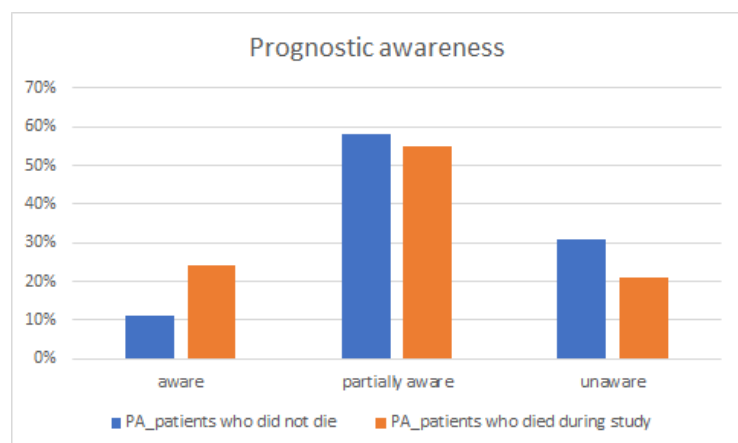
DISCUSSION

Prognostic awareness seems to be a stable concept but it might slightly change toward death. The stability of PA might be explained by the lack of communication with physician or by the fact that it might be influenced by more stable factors such as personality traits. Accurate PA was not associated with worse quality of life in terminal patients but it was associated with worse QoL in the whole sample. This finding means that more research is needed to explain the relationship between PA and QoL which might help clinicians to not be afraid of prognostic disclosure.

REFERENCE

Loučka, M., Vlčková, K., Tučková, A., Poláková, K., Houska, A., Matějů, M., & Donátová, Z. (2021). Prognostic awareness in advanced cancer patients and their caregivers: A longitudinal cohort study. Psycho-Oncology.

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