نامه به سردار

توسعه مراقبت تسکینی در بیماران سرطانی، ضروری متفق مانده

هادی حسنخانی، آذر رحمتی، جواد دهقان نژاد

سازمان بهداشت جهانی مراقبت تسکینی را به عنوان راهکاری برای ارائه کیفیت زندگی به بیماران سرطانی نشان می‌دهد که تنها ۱/۹ از تمام مراقبت‌های تسکینی که مراقبتی همه جانبه از بیمار بر اساس مرکز مطالعات کیفی، دانشگاه علوم پزشکی تبریز، تبریز، ایران

۱. دانشیار، مرکز مطالعات کیفی، دانشگاه علوم پزشکی تبریز، تبریز، ایران.
۲. دانشیار، دانشکده پرستاری و مامایی، دانشگاه علوم پزشکی تبریز، تبریز، ایران.
۳. از دانشجویی دکترای پرستاری، دانشکده پرستاری و مامایی، دانشگاه علوم پزشکی تبریز، تبریز، ایران. (نوعیسنده مستند)
مراقبت تسکینی، مراقبت تسکینی، سرطان، پرستاری

کلید واژه‌ها: مرافقت تسکینی، سرطان، پرستاری

تاریخ دریافت: 97/06/27
تاریخ پذیرش: 97/09/27

فهرست منابع

https://jamanetwork.com/journals/jamaoncology/fullarticle/2588797
نامه به سردار، توسعه مراقبت تسکینی در بیماران سرطانی، ضرورت...

هادی حسنخانی و همکاران


“Letter to Editor”

Development of Palliative Care in Cancer Patients: A Neglected Necessity

Hadi Hassankhani1, Azad Rahmani2, *Javad Dehghannezhad3

Through the current century, cancer has been one of the most challenging diseases worldwide(1). According to the latest statistical and epidemiological surveys, cancer is the third leading cause of mortality in Iran following cardiovascular diseases and traffic accidents(2). It is expected to witness the emergence of 130 new cases of cancer in Iran by 2025, which is at least 35% higher than the current statistics. Maintaining the current situation and providing essential services to Iranian cancer patients require an increase in resources. Therefore, it is significantly crucial to focus on this issue in the country(3). The World Health Organization (WHO) has introduced palliative care as a solution for improving the life quality of patients with refractory diseases and their families. According to this organization, 34% of patients requiring palliative care are cancer patients, only 14% of whom receive palliative care. It is notable that about 78% of these patients live in the low or middle-income countries(4). Caring for cancer patients includes all stages of the disease, from diagnosis to the end of patients’ life. Therefore, palliative care which provides comprehensive care for the patient and his/her family is emphasized for these patients(5). Review of the literature on this topic showed strong and definite evidence that confirmed the positive effect of palliative care services on the reduction of the symptoms of disease and improvement of satisfaction and the quality of life of patients(6). Almost all studies examining health care costs have found palliative care cost-effective for the health system and the patient, which is more evident for cancer patients due to causing a reduction in the cost of care and hospitalization(7). According to a study by the International Observatory on End of Life Care (IOELC) in the UK in 2011 on the overall condition of providing palliative care in the world, Iran was in the group 2 based on 2006 annual report, which indicated the lack of formation of any structural activity regarding palliative care in this country. However, based on the 2011 annual report, Iran has been upgraded to the group 3a, which means providing palliative care in a limited and separate form. The approach to the integration of care in developed countries is such that palliative care is provided globally and systematically and is accessible to all people in the community(8). Evaluation of advanced health systems demonstrated that various models of palliative care are applied for cancer patients, including Hospice, home-based palliative care, hospital-based palliative care, ambulatory-based palliative care clinics, pediatric palliative care, palliative care consultation services, spirituality palliative care model, community-based palliative care model, and early based palliative care(9). For instance, as the leading country in terms of palliative care, England provides 1139 palliative cares for adults (including 356 home-based care, 305 hospital counseling teams, 257 daily clinics, 158 Hospice, and 63 hospital beds) and 258 pediatric palliative cares (including 112 hospital counseling teams, 112 home-care teams, and 34 Hospice).

In Iran, palliative care is not provided coherently for cancer patients, and no fundamental measures have been taken to establish such models. Despite the importance of this topic, palliative care has become a major challenge for the health system(8). In general, palliative care is often provided by a team as it is

1. Associate professor, Faculty Member of the School of Nursing and Midwifery, Tabriz University of Medical Sciences, Tabriz, Iran.
2. Associate professor, Faculty Member of the School of Nursing and Midwifery, Tabriz University of Medical Sciences, Tabriz, Iran.
3. PhD Student in Nursing Education, School of Nursing and Midwifery, Tabriz University of Medical Sciences, Tabriz, Iran. (*Corresponding author) Tel: +989149163638 Email: jdehghannezhad@yahoo.com
Development of Palliative Care in Cancer Patients: A Neglected Necessity


Received: 3 Sep 2018
Accepted: 2 Dec 2018