

**Keywords :** Hospice care; Cancer, Palliative care; Pain

## **I n t r o d u c t i o n**

One of the worst diseases in the world is cancer. There is no worse diagnosis for the majority of individuals than a cancer diagnosis, despite its enormous social consequences. In 2020, there will have been 10 million cancer-related deaths worldwide, according to the latest projections on the disease's global burden provided by the International Agency for Research on Cancer (IARC). By 2040, the projections are projected to increase further to 30.2 million cases. India alone has been responsible for 1.32 million illnesses and 8,520,000 deaths. By 2040, India is expected to be responsible for 2.09 million cases and 1.38 million fatalities. Patients will need palliative care at some time during their disease because they are identified in the latter stages and since there is no treatment [1]. When cancer reaches the terminal stage of the disease, curative treatment is not an option because there is no way to stop or reverse the disease [2]. The appropriate way to approach death is essential [3], and hospices may help. A decent death improves the medical field's orientation, strategy, and outcomes to a considerable extent by giving patients treatment depending on the severity of their condition and ensuring a good quality of life. As patients near the end of their lives, hospice patients get comprehensive care from professionals from a variety of fields. Patients must meet specific requirements in order to receive hospice care, such as being in the latter stages of their illness and having a life expectancy of no more than six months. In the US, eligibility for palliative care is based on need; there are no prognostic criteria; hospice eligibility is based on prediction of life expectancy, which is fewer than six months. In each of these terms, other countries are equivalent. The major goal of patient treatment is symptom control because it enhances the rest of their life. Family members of the patient are also involved in palliative

care. To ensure that the patients may live comfortably and with dignity,

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patients with terminal cancer attain quality of life and a peaceful death. Hospice care facilities offer death a special significance.

### **Limitations and Implications**

Although every attempt was taken to perform this work with as few restrictions as possible, some nevertheless exist. Only one hospice in Bengaluru, India was included in this study. The sample is constrained since it might be challenging to get patients' agreement for things like being hesitant to participate, not knowing their diagnosis and prognosis, or having other health problems. It is advised that future research include more participants and caregiver perspectives from various hospices.

### **Conclusion**

This study has shown that hospice care has benefited cancer patients who are nearing the end of their lives. It is clear that the patient received a lot of assistance from the chosen hospice as a result of the comfort and relaxation it provided. The same may be done for larger populations of patients by opening more, easily accessible hospice facilities. Additional research showed that palliative care service providers are more economical than other medical institutions. Building such facilities will boost the number of patients using these services, provide them a dignified death, and help their family and carers.

### **Conflict of Interest**

Author declares no conflict of interest.

### **Availability of Data and Materials**

Not applicable.

### **References**

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