

Introduction

Despite significant breakthroughs in surgery, initial chemotherapy, and innovative recurrent disease treatments, advanced epithelial ovarian cancer remained lethal in the majority of cases in 2016. Furthermore, both the disease and the accompanying adjuvant treatment have a significant impact on overall quality of life. The malignancy causes symptoms, but the therapy might lead to even more serious issues, such as neuropathy, nausea, exhaustion, anorexia, and discomfort. As oncology practitioners, we have a natural propensity to focus on the disease and treatment response rather than the treatment-related pain of our patients. Our patients, on the other hand, are hesitant to report their problems for fear of having their treatment interrupted or altered. As a result, while rigorous surgery and adjuvant therapy may temporarily beat the disease into submission, the patient may be suffering from treatment-related symptoms that are sometimes permanent.

Early incorporation of palliative care into the treatment of women with advanced epithelial ovarian cancer allows us to address this conundrum and, in some cases, prolong life. 151 patients with newly diagnosed metastatic non-small cell lung cancer were randomized to integration of outpatient palliative care from the time of cancer diagnosis vs. conventional oncologic therapy in the most well-known of the cancer patient randomized studies [1]. Despite less active intervention at the end of life, the early palliative care integration group not only had significant improvements in quality of life and mood, but also (unexpectedly) had a statistically significantly better overall survival (11.6 versus 8.9 months, $p = 0.02$). Other investigations in oncology patients [2] have corroborated the findings of this study. In their Choosing Wisely campaign, our own Society of Gynecologic Oncology has lobbied for the inclusion of palliative care in the care of women with gynecologic cancer.

What does palliative care entail, and how should it be delivered?

References

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