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ere are more individuals who can no longer be treated for their cancer but may nonetheless be expected to survive with the disease for a long time. e time between receiving a non-curative cancer diagnosis and passing away has sharply increased for many solid

caring for general health, including managing chronic conditions and promoting good health and disease prevention. rough a survivorship care plan, for example, such information can be communicated and integrated. Such plans are typically developed a er patients have nished curative cancer therapy. However, these di culties may also be pertinent to and have a detrimental e ect on people with advanced, incurable cancer. Next, we brie y discuss the issues that patients with advanced, incurable cancer can encounter from both a palliative and survivorship care standpoint.

Patients with long-term incurable cancer may feel the e ects of their disease, such as pain, or they may have concerns about how to treat any future symptoms (e.g., dyspnea close to the end of life). Additionally, they may both experience short-term and persistent side e ects of their current therapies (such as hot ashes brought on by continued hormonal therapy) as well as long-term and persistent