Report of results from a survey for oncologists about the established guidelines in supportive or palliative medicine

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Background: NCCN guideline recommends the oncology team should not only give supportive care but also do screening and give primary palliative care for cancer patients. In Japan, all medical doctors must take a certificate of basic palliative medicine and do their best to give early palliative care to their patients. The Japanese Society for Palliative Medicine (JSPM) has published the guidelines about palliative care about cancer pain, terminal sedation, and dyspnea. However, clinical oncologists do not always use in practice.

Methods: We did a web survey to oncologists belong to the Japanese Association of Clinical Oncology to investigate how to manage chemotherapy-induced peripheral neuropathy (CIPN), pain, respiratory symptom, and digestive symptom. In addition, we researched how degree they recognize the guidelines.

Results: The percentage of response to the survey was 31. The incidence of thoracic, digestive, breast oncologists and hematologists were 31%, 32%, 7% and 21% of the responders, respectively. The rate of "not very recognized" is 31% for The ASCO guideline for CIPN, 7% for the JSPM guideline for cancer pain, 14% for the JSPM guideline for respiratory symptom, and 16% for the JSPM guideline for digestive symptom.

Conclusions: The oncologists who are a specialist for management of cancer patients should deeply understand the guidelines for supportive care or palliative medicine and be required to become a first contact giver of excellent palliative care for each cancer patient.