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# Integration of Oncology and Palliative Care in the Indian context-Reality Check



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### **Mini Review**

75-80% of patients who are diagnosed with cancer in India have advanced disease (Stage III and Stage IV) that is not amenable to curative treatment [1], which means that they are likely to have pain and other symptoms and psychosocial concerns. These burdens vary with the economic and political situations and are affected by such factors as legal restrictions on access to drugs to relieve pain, and a medical culture in which quality-of-life considerations are undervalued in relation to imperatives to treat. These issues could be ameliorated by increased investment in cancer screening, removal of restrictions on prescription of opioids, and improvements in medical education to increase recognition of treatment futility. Supportive, palliative, and end-of-life care offer the potential to enhance quality of life, improve pain control, and reduce suffering for patients with cancer and their families, and to give patients a dignified death [2].

Approaches to improve the application of palliative care include education, training, and research endeavors. Educational efforts in palliative and end-of-life care have targeted nurses, physicians, and other disciplines associated with clinical care. Research in Palliative care is very essential to deliver high-quality palliative care. Finding and using the best available evidence should be part of professional lives and good interdepartmental communication helps in good palliative care delivery. Evidence-

based palliative care is need of the hour. We need to do high quality trials in palliative care.

Many developments like Megestrol for cancer cachexia, Biphosphonates for pain in bone metastasis, Opioids for the palliation of breathlessness in terminal illness have come from the research in palliative care. There is good scope for developing a research culture and encouraging specific competencies in the Indian palliative care scenario. Sustainable and quality research in India will be possible by establishing a network of individuals-doctors, nurses, paramedics, other professionals, institutions, and organizations, including commercial establishments who have a stake in the palliative care practice. The issues that can improve the palliative care delivery and the areas where evidence of practice is still weak can be identified by forming network and collaborative groups for the application of study and research methods in India.

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