Total parenteral nutrition for patients with advanced life-limiting cancer: decision-making in the face of conflicting evidence

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Alison S. Clay, Amy P. Abernethy
Divisions of Critical Care Medicine and Medical Oncology, Departments of Medicine and Surgery, Duke University, Durham, North Carolina, USA

Presented by: Sabrina Kwon Family Medicine Resident, during morning rounds at the Grey Nuns Tertiary Palliative Care Unit, September 3, 2008

ABSTRACT:
Total parenteral nutrition (TPN) offers a method for ensuring adequate nutritional intake in patients whose eating is compromised; for reasons related to treatment side effects and their disease itself end-stage cancer patients comprise a significant proportion of patients on TPN. In patients with advanced life-limitings cancer, at or near the end of life, the benefit of TPN is unclear. Conflicting research evidence spanning several decades both supports and refutes the use of TPN. In this paper, we suggest one approach to TPN at the end of life, acknowledging that there are many unresolved medical, ethical, and moral issues surrounding the use of TPN in palliative/end-of-life patients. We encourage the field of palliative medicine to use the TPN controversy as a forum in which to discuss the challenges of applying evidence-based practice principles to palliative medicine.

STRENGTHS:
- Raises a very relevant issue in palliative care
- Examines administration of TPN not only from a medical viewpoint but also in social context.
- Gives a concise summary of the important points in two tables (Table 1. Clinical pearls and Table 2. Selection of home TPN patient in advanced stage cancer)

WEAKNESSES:
- Evidence coming from outdated studies with very small numbers of n
- A lot of mention of animal studies, but not enough mention of good human studies
- Biased presentation (biased against TPN, for example: section on TPN goes into possible risks and the wording of which could be more objective)

RELEVANCE TO PALLIATIVE CARE:
High relevance – often patient families will ask for TPN thinking their loved one is dying more quickly or because of starvation. This paper is relevant in the sense that it outlines some of the evidence so far showing what limited circumstances TPN has been shown to help, and why, in more cases than not, TPN would not be appropriate.