

Attitudes of oncologists towards palliative care and the Edmonton Symptom Assessment System (ESAS) at an Ontario cancer center in Canada

Presented: Sept 29, 2015; by Sarah Burton-MacLeod

Reference: Chasen, M, Bhargava, R, Datzell, C, Pereira, JL. *Support Care Cancer* (2015) 23:769-778.

Abstract:

Background: Cancer Care Ontario promotes the Edmonton Symptom Assessment System (ESAS) for standardized systematic screening and assessment of symptoms across cancer centers in Ontario, Canada. Attitudes of medical oncologists (MOs), radiation oncologists (ROs), and general practitioners in oncology (GPOs) toward palliative care, and the ESAS were surveyed in Ottawa.

Methods: A four-part questionnaire was developed, drawing on items from similar studies.

Results: Forty respondents (17 MOs, 16 ROs, and 7 GPOs) were interviewed. Attitudes to palliative care: regarding coordination of care across the illness trajectory including end of life by MOs, all ROs disagreed while 71.4% of GPOs and 41.2% of MOs agreed that this was the MO's role. Most respondents supported palliative care alongside concurrent anti-tumor therapies (82.4% MOs, 62.5% ROs, and 100% GPOs). Attitudes to ESAS: respondents agreed that the ESAS enhances care and assessment of symptom severity. ROs felt that reviewing the ESAS histogram was less useful than did MOs (42.9 versus 76.5%, respectively); 56.3% of ROs and 88.2% of MOs agreed that the ESAS is useful for follow-up ($p < 0.08$); 64.7% of MOs, 88.3% of GPOs, and 6.3% of ROs agreed with ESAS completion at every visit ($p < 0.00$). Frequency of use of the ESAS: 62.5% of respondents reported inspecting the ESAS "most of the time or always," while 17.5% reported "never" or "rarely".

Conclusions: MOs and GPOs appear more positive than ROs toward regular use of the ESAS. There is discordance between what is perceived to be a useful beneficial instrument versus actual use of the instrument in daily practice. The reasons for this gap need to be better understood in future studies.

Strengths:

- Excellent response rate!
- Built on previous survey work and used focus groups and input from Ethics to develop additional survey components
- Evaluated attitudes towards palliative care and use of ESAS specifically as well as knowledge of symptom guidelines and palliative care resources

Weaknesses:

- Did not evaluate ESAS-r, but only previous version, ESAS
- Quantitative study only
- Some survey questions, authors acknowledge, may have been vague or open to interpretation such as the one about responsibility for coordination of care

Applicability:

This study highlights the importance of including palliative care and symptom management in medical education (UGME/Post grad/CME). Attitudes are shifting, but there is still some disconnection persisting for some physicians between the importance of symptom screening and its perceived clinical impact.