

ID: 680227

Developing methods to measure the need for palliative care services, with application to the Portuguese health care system

T.S. Cardoso, M.D. Oliveira, A.B. Póvoa, Instituto Superior Técnico, PORTUGAL;

A.B. de Sá, Faculdade de Medicina da Universidade de Lisboa, PORTUGAL;

Objectivos (Objectives):

Key medical advances in the second half of the twentieth century have been crucial for populations in developed countries living longer but with increased chronic diseases. Despite these populations need to access common healing and prophylactic treatments, the eldest groups also need to access special care with the main purpose of allowing them to have quality of life until the end of their lives. The package of special care for these population groups includes palliative care services. Palliative care services are services with an holistic character, delivered to patients that go through intensive suffering associated with progressive, chronic and advanced disease, so that specific care aims at improving their quality of care (on psychological, social and spiritual matters) and the quality of life of patients' family members. Health care systems are now facing the challenge of developing proper palliative care services, appropriate in type and scale. Nevertheless, there has been little research in the area of planning palliative care services: although many studies have carried out health needs assessments in other areas, just a few have done so for palliative care. It is possible to identify some approaches to estimate palliative care needs in these studies, but they reveal fundamental limitations, for example: they avoid quantifying need, as there is lack of data on utilization of palliative care services; they mainly use mortality data as a proxy for need, and tend to use scarce mortality data and not to make explicit the assumptions in use when computing estimates; and they tend to produce crude estimates, not differentiating needs by area and by future need (answering to changes in population numbers). The Portuguese government has been building the National Network of Integrated Continuous Care which integrates the delivery of palliative care, but official documents do not provide estimates of need. This study aims at developing methods to measure the need for palliative care services, and applies those methods to the Portuguese health system.

Metodologia (Methodology):

This study proposes three alternative methods to measure the need for palliative care services. The first method makes use of mortality data by selected causes of death; the second method makes use of survey data on the dependency of individuals and on their loss of functionality caused by type of disease; and the third method makes use of survey data on the dependency of individuals and on their loss of functionality, regardless the disease that caused that situation. The three methods present different advantages and



limitations and make use of different underlying epidemiological data, and these differences were systematically compared within this study. The methods were applied to the Portuguese health care system, so as to: quantify need for palliative care services; compare why different methods might lead to a wide range of estimates; and to measure the gap between the need and the current supply of palliative care services. A wide range of demographic and mortality data, as well as data from the 4th National Health Survey were used to produce estimates of need using the three methods. A collected database with epidemiological data was used to test the validity of some figures produced by the methods.

Resultados (Results):

Analysis of preliminary results shows that there is a broad gap between need and supply of palliative care services in Portugal. Nevertheless, the use of different methods leads to a broad range of estimates on the need for palliative care services. Inadequacies in data partly explain variability in estimates.

Conclusões (Conclusions):

If the Portuguese government wants to deliver the policy objectives stated for building the National Network of Integrated Continuous Care, it will have to substantially increase the supply of palliative care services.