Scottish research in non-cancer palliative care in the last decade: a scoping review





Care and support through terminal illness

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Background

The need for palliative care, especially amongst patients with non-cancer diagnoses, is increasing as the population ages.^{1,2} Understanding non-cancer research is crucial to develop early palliative care for all patients in need.

Objective

To gauge the scope of the research carried out in non-cancer palliative care in Scotland since 2006.

Method

A scoping review of non-cancer palliative care research conducted in Scotland between 2006 and 2015 was conducted. 4 databases were searched. Study characteristics with regards to setting, sample, research method and key findings were examined.

Results

52 research papers were identified.

Figure 2: Methods used in Scottish research on palliative care for people with a non-cancer diagnosis. (*n* = number of papers)



Figure 3: Seven core research themes identified.



- There was an upward trend in the studies conducted, the majority of which were qualitative. (Figures 1&2)
- 7 core research themes emerged. (Figure 3)
- 29% of papers focused on specific non-cancer groups; and a vast body of research on the experiences and needs of patients with non-cancer has emerged. (Figure 4)
- Patient identification for a palliative care approach was an important theme. Several papers show that a significant number of patients are not receiving palliative care despite the fact that they would benefit.
- Several papers focused on improving the delivery of palliative care within the hospital setting.



Figure 1: Count of peer-reviewed articles by year of publication.





Conclusion

- A considerable body of Scottish research now exists in this area and clearly shows inequalities in palliative care provision.
- Identification of patients for a palliative approach has improved, but further training for health care professionals is needed as highlighted by the Scottish Government's new strategic framework.³
- Service redesign is required to meet the multi-dimensional trajectories of need of patients with organ failure, frailty and multimorbidity as well as cancer patients.
- Further research should prioritise interventions that target non-cancer patients.

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