Principles of palliative therapy in the care of patients with metastatic breast cancer

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1 INTRODUCTION

Breast cancer is the leading cause of cancer death in the female population in all regions of Brazil, except in the North, where cervical cancer occupies this position. The mortality rate due to breast cancer, adjusted by the world population, was 14.23 deaths/100,000 women in 2019, with the highest rates in the Southeast and South regions, with 16.14 and 15.08 deaths/100,000 women, respectively. Considering the increase in the number of cases of cancer – especially breast cancer – part of them in advanced stage and without possibility of cure, that is, metastatic, it is evident the need and importance of palliative care (PC) that aim comfort and management at the end of the life of cancer patients.

2 OBJECTIVE

The objective of this work is, therefore, to define the main recommendations of palliative therapy proposed in the care of patients with metastatic breast cancer.

3 METHODOLOGY

This is an integrative review of the literature conducted in August 2022 from the descriptors in Health Sciences (DeCS) together with the Boolean operator "AND", which resulted in the descriptor: "Metastatic breast cancer" AND "Palliative care". It was developed in the following virtual libraries: National Library of Medicine (PUBMED), Medical Literature Analysis and Retrieval System Online (MEDLINE), Latin American and Caribbean Literature in Social and Health Sciences (LILACS) and The Scientific Electronic Library Online (SCIELO). Inclusion criteria were: publications made in English and/or Portuguese between 2012 and 2022, which contained the selected descriptors. Articles not made available in full or that did not have free access through the databases were excluded, in addition to those that were duplicated.

4 DEVELOPMENT

Advanced cancer patients who have end-of-life discussions with their doctors are more likely to receive them more consistently with their desires and less intensive than patients who have received usual
care. A good interpersonal relationship between patient and physician is important for the patient's acceptance of the disease and participation in the decision of treatment options. Hospitalized patients with metastatic breast cancer are commonly hospitalized for uncontrolled symptoms and poor prognosis. However, only a minority receive outpatient CP or are referred to hospital services in the inpatient environment. However, there are still uncertainties about the best time to indicate PC, despite the clear benefits of early integration, there are still concerns about negative perceptions in their relationships.

5 FINAL CONSIDERATIONS

The palliative care strategy positively impacts the quality of life of patients and their families because it is a physical, psychosocial and spiritual support program. Moreover, it should be initiated early after the diagnosis of metastatic breast cancer to ensure greater benefit.
REFERENCES


