**PRESS RELEASE**

**Targeted Timing of Palliative Care for Lung Cancer**

**Study by Karl Landsteiner University of Health Sciences shows need for timely consultations for palliative care in small cell lung cancer.**

**Krems, Austria, 14. December 2022 – Choosing the appropriate timing for specialized palliative care can have a positive impact on life expectancy for patients with small cell lung cancer. This is the result of a recently internationally published study by the Karl Landsteiner University of Health Sciences (KL Krems, Austria). There, the relevant data of 152 patients were evaluated at the Krems University Hospital. The result shows a differentiated picture: the life expectancy of those affected depends both on the reason for referral for special palliative care and on its starting time relative to the course of the disease.**

The most recent recommendations of the WHO and others emphasize the timely start of palliative care for cancer patients who have no therapeutic option left. A distinction is made between special palliative care (SPC) and "normal" palliative care (PC), whereby special palliative care is carried out by a multi-professional team, including trained nursing staff as well as medical specialists, psychologists, and social workers. Numerous international studies prove an additional gain in quality of life and improvement of other parameters for SPC. But this more comprehensive care places high demands on the available resources, and thus the selection of the best period for SPC is becoming increasingly important. New insights into this complex and sensitive matter are now offered by a current study of the KL Krems University Hospital for Small Cell Lung Carcinoma, led by Priv.-Doz. Dr. Gudrun Kreye.

**Life-Prolonging**

"Our results show a complex picture," explains Dr. Klaus Hackner, one of two first authors of the study and senior physician at the University Hospital Krems (UK Krems) of KL Krems. "It is clear that those patients lived significantly longer who started SPC at least 60 days before their death. This is a clear indication that the time of onset of SPC in relation to the remaining lifespan may be of decisive importance for the life expectancy of those affected."

A closer analysis of the data showed that especially patients with a poor general condition (high ECOG score - Eastern Cooperative Oncology Group) and/or metastatic tumours were referred to SPC early after diagnosis. When analyzing the data, this fact then also led to a result that initially contradicted other studies: patients who did not receive SPC actually lived longer on average (17 months) than those who received appropriate care (8 months). An apparent contradiction, which was explained by the above-mentioned variation in the health status of the patients at the time of referral.

**Best Care. Scarce Resources.**

"In fact," explains Dr Hackner, "it seems that a referral is often made shortly after diagnosis - irrespective of life expectancy. The reason for this is to ease the burden of subsequent therapies for those affected. An understandable reason, but with limited resources for SPC, it can also lead to a lack of support for those who have no treatment option left and are in need of extra care."

The study team concludes that more importance should be placed on selecting the optimal time to start (S)PC in the future, and that further analysis is urgently needed in this regard. In particular, the expected remaining lifespan should be taken into account when making the decision, because - as the study shows - this is how SPC can actually have a prolonging effect on lifespan, in addition to all the other relief it provides to those affected in their final months.

With this study involving the Clinical Department of Pneumology and the palliative team of the Clinical Department of Internal Medicine 2 of the UK Krems, KL Krems demonstrates the comprehensive spectrum of its clinical research in oncology. In addition to the continuous and patient-oriented further development of the best therapy options, there is also a special focus on the optimization of palliative care for patients.

Original publication: A Retrospective, Single-Center Analysis of Specialized Palliative Care Services for Patients with Advanced Small-Cell Lung Cancer. C. Wachter, K. Hackner, I. Groissenberger, F. Jutz, L. Tschurlovich,N.-S. Le, & G. Kreye. Cancers2022,14,4988. https:// doi.org/10.3390/cancers14204988

**About Karl Landsteiner University of Health Sciences (2022)**

At Karl Landsteiner University of Health Sciences (KL) in Krems, the comprehensive approach to health and disease is a fundamental objective for research and teaching. With its Europe-wide recognized bachelor-master system, KL is a flexible educational institution that is tailored to the needs of students, the requirements of the labor market as well as the scientific challenges. Currently KL hosts about 600 students in the fields of medicine and psychology. The three university hospitals in Krems, St. Poelten and Tulln ensure clinical teaching and research at the highest quality level. In research, KL focuses on interdisciplinary fields with high relevance to health policy - including medical technology, molecular oncology, mental health and neuroscience, as well as water quality and related health aspects. KL was founded in 2013 and accredited by the Austrian Agency for Quality Assurance and Accreditation (AQ Austria). [www.kl.ac.at/en](http://www.kl.ac.at/en)

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