



Article of the Month

September 2018

Breakthrough cancer pain (BTcP) management: a review of international and national guidelines

Davies AN, Elsner F, Filbert MJ et al.

BMJ Supportive and Palliative Care 2018; 8:241-249

The main objective of this review was to determine the continued relevance of the APM 2008 breakthrough cancer pain guidelines by comparing them with current national and international guidelines.

In general, there was good agreement between the specific BTcP guidelines. The main areas of contention were identified as being the type and dosage of rescue medication.

The 2008 APM guidelines relied on expert opinion and low-grade evidence. In the interim, few studies have added to the evidence base. The authors recommend that more head-to-head studies of rapid-onset opioids versus oral opioids are needed to support clinical practice, as well as an international consensus on the definition and diagnosis of BTcP.

[Click here](#) to view the full article

Duration and determinants of hospice-based specialist palliative care: a national retrospective cohort study

Allsop MJ, Ziegler LE, Mulvey MR et al.

Palliative Medicine 2018; 32:1322-1333.

This study of 64 UK hospices aimed to identify the patient and organisational factors that influence the duration of hospice-based palliative care (inpatient, community or outpatient) in the UK prior to death. Patients with a progressive, advanced illness with a prior hospice referral who died in 2015 were included.

The median time for referral to death was 48 days. 40% of all referrals were made within 30 days of death. Increasing age and non-cancer diagnosis were significant predictors of fewer days of hospice care prior to death.

The authors' conclusions included that there may be a need for reorientation of services to both older age groups and non-cancer conditions and suggest that further research is needed to understand the reason for such late referrals to UK hospice care.

[Click here](#) to view the full article