The preferred place of death between terminally ill cancer patients and their families in Shanghai

Xiaoli Gu, Wenwu Cheng, Menglei Cheng and Minghui Liu. Department of Palliative Care, Shanghai Cancer Center, Fudan University, Shanghai, China

Purpose
Where people die may influence the quality of their death, little is known about the choice for place of death of cancer patients in Shanghai, China. Considering the culture difference and palliative care implement, we organised a prospective questionnaire based on the choice death place between terminally ill cancer patients and their families. Methods: Among 4 years, 352 Patient-family care giver dyads were surveyed. The main outcome variables of the study were age, sex, income, marital status, living condition, religious beliefs, medical resources, the choice of the place of death and its reason. Descriptive statistics, \( \chi^2 \) and \( \kappa \) coefficients were used. Determinants of congruence on preferences were identified by multivariate logistic regression.

Results
The majority choice of death place was home (82.5% and 72.3%). Patient-care giver dyads achieved 68.5% agreement on the preferred place of death. The \( \kappa \) coefficient of congruence was 0.59 (95% CI 0.54 to 0.66) For patients, worries of being a burden to others is the first reason for the choice of home; for families, the first reason was culture concerns. The Logistic regression analysis revealed the following independent predictors of preferring to die at home: age and living conditions.

Conclusion
This study described the preference of the death place choice and potential influencing factors and revealed the possibility for the integration of effective home care model in Shanghai Palliative Care programs. Effective interventions need to be developed avoid unnecessary re-hospitalisations and unfavourable hospital deaths, and improve accordance with the patients’ wishes. Acknowledge for the funding form helped the hospice: The preference of place of death between terminally ill cancer patients. (Funding NO: 2005583)