

**Results** Median age was 65 years (range 31 to 87 years) and 52% were female. Site of primary cancer was Breast (18%), Lung (17%), Ovary (12%), Colon (11%), Prostate (10%), Kidney 8% & other sites in 24%. Median survival was 10.5 months (range 0 to 21 months). 1.9% of patients died within 30 days of chemotherapy. Only 45% of patients who had palliative chemotherapy during December 2011 were alive on 2012 Christmas day. But reassuringly, 30% of patients were still alive in August 2013 and these relatively long term survivors were distributed across the disease spectrum.

**Conclusion** A significant number of patients (55%) died before the next Christmas period. Hence clinical judgement is critical in prescribing palliative chemotherapy to patients during the Christmas period. Patients, who are clinically judged to be poorly and unlikely to survive a year, should be given the opportunity to skip chemotherapy and spend time with family during Christmas period if they wish to do so.

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**'IS IT MY LAST CHRISTMAS DINNER?' SURVIVAL OF CANCER PATIENTS HAVING PALLIATIVE CHEMOTHERAPY DURING CHRISTMAS PERIOD**

Rafael Silverman, Louis Smith, Santhanam Sundar. *Nottingham University Hospitals NHS trust, Nottingham, UK*

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**Background** Advanced incurable cancer patients quite often live by milestones such as son or daughter's graduation, birth of a new grandchild or festive periods such as Christmas. Cancer patients need practical and real life survival information to plan their limited life. But most of survival data available in literature is from fitter patients in clinical trials who have a better survival. There is a dearth of real-life, pragmatic, survival information from routine clinical practice. To address this need, we assessed the chances of patients having palliative chemotherapy during 2011 Christmas period to survive until the 2012 Christmas period.

**Methods** All adult cancer patients, who had palliative chemotherapy in Dec 2011, were identified from the electronic chemotherapy prescription system (ChemoCare®) and survival data was extracted from the Hospital electronic records. 30-day mortality assessed as per NCEPOD SACT report recommendation.