

Doctors struggle to manage anxiety in terminally ill patients, research shows

December 20, 2017

New research has shown that, despite it being a common problem, doctors struggle to manage anxiety in their terminally ill patients.

Researchers at Marie Curie Palliative Care Research Department at University College London found that 93% of specialist palliative care doctors reported having difficulties in managing anxiety and only a third (33%) felt they had adequate training in the area. 71% said they had difficulties in assessing anxiety.

The findings highlight key issues in terms of how anxiety is assessed and managed in terminally ill patients, including; infrequent use of screening tools, poor access to mental health services, and wide variations in prescribing practice.

The most common difficulty doctors reported was lack of access to non-pharmacological therapies with 71% of physicians reporting difficulty in accessing specialist psychological support services. This is despite NICE guidance which recommends that cancer patients with significant psychological distress should be offered referral to specialist support and that physicians should have close working relationships with mental health teams.

Some doctors reported that they used benzodiazepines first-line for their terminally ill patients who still had months to live. NICE guidelines for the general adult population advise against prescribing benzodiazepines for anxiety except in short-term crisis situations, but evidence and guidelines for

terminally ill patients are lacking.

Dr Nicola Atkin, a researcher working with the UCL Marie Curie Palliative Care Research Department, said:

We believe this is the first study of its kind and the findings suggest that some terminally ill patients with anxiety may not be receiving the appropriate treatment. However, the research also highlights the barriers that doctors face that may be amenable to improvement, such as the need for formal training, further study of tailored assessment tools and anxiety treatments for this group of patients, and the development of local referral networks with mental health services.

The next essential step should be the development of a UK-wide guideline to support this service development and clinical decision making.

Dr Bill Noble, Medical Director for Marie Curie, said:

Assessing and managing anxiety in terminally ill patients is obviously complicated by the fact that anyone facing the end of their life inevitably experiences some degree of anxiety. However, there is no doubt that the psychological distress of acute anxiety merits treatment in the same way that we would treat physical pain.

The availability of non-pharmacological interventions is poor and the evidence to guide prescribing is sadly lacking. This is an area where good clinical trials are badly needed.

The cross-sectional survey was sent to all physicians working in palliative care in the UK who were members of the Association for Palliative Medicine and was completed by 230 respondents.

Anxiety is common in adults living with terminal illness but

is frequently unrecognized and untreated. It can adversely affect quality of life, social relationships and daily functioning at a critical time. It impairs the individual's ability to cope with their illness, erodes their trust in physicians, reduces treatment compliance and makes physical symptoms more difficult to manage.

Source:

<https://www.mariecurie.org.uk/>