

Role of Physical Therapy in Palliative Care of Cancer Patients

Sir,

In contrast to the previous belief regarding palliative care focusing on alleviating suffering at the end of life only, it has recently started to be considered as the best practice to be implemented for life-threatening health conditions such as cancer. Palliative care aims to prevent and reduce symptoms to improve the quality of life (QOL) by maximising function and cost-effectively reducing physical reliance in patients of cancer,¹ which remains the second leading cause of death after the cardiovascular diseases. It is believed that every sixth death in the world is due to the cancer. At the same time, almost half of all the patients who die from it are of 70 years or older.² According to the International Agency for Research on Cancer (IARC), the number of prevalent cancer cases in Pakistan for the previous five years stands at 329,547 with a mortality rate reaching 35.55%.³

Palliative care in the cancer patients receiving physical therapy may incorporate active exercises of the upper and lower extremities in addition to the management techniques like myofascial release and proprioceptive neuromuscular facilitation. Since the chances of potentially modifiable functional loss are more significant in patients with progressing age, evidence suggests that the above protocol, particularly in the elderly, reduces fatigue and severity of comorbid symptoms such as pain, drowsiness, anxiety, and depression as well as enhances appetite and general well-being.⁴ Furthermore, palliative physical therapy improves mobility by reducing dyspnea and leg edema in addition to the significant improve in cognitive function alongside the decreasing need of caregiver assistance, health care resources utilization, or hospitalisation.⁵

In conclusion, the continuous increase in the number of patients requiring palliative care in Pakistan necessitates the involvement of physical therapists as per mutual understanding amongst the healthcare team members to formulate a policy for streamlining its implementation at the ground level. This can only happen if communication and coordination amongst the palliative care team members is worked upon and strategies are developed for the empowerment of the patients along with determining the methods for assessment and evaluation of the qualitative aspects of physical therapy in palliative cancer care.

COMPETING INTEREST:

The authors declared no competing interest.

AUTHORS' CONTRIBUTION:

SA: Drafting the work and revising it critically for important intellectual content.

AA: Substantial contribution to the conception and design of the work, acquisition, analysis, and interpretation of data.

HT: Final approval of the version to be published.

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REFERENCES

1. Radbruch L, De Lima L, Knäul F, Wenk R, Ali Z, Bhatnagar S, et al. Redefining palliative care - A new consensus-based definition. *J Pain Symptom Manage* 2020; **60** (4):754-64. doi: 10.1016/j.jpainsymman.2020.04.027.
2. Roser M, Ritchie H. Burden of disease. Our world in data. 2021 Sep 25. Cited 2022 March 19. URL ourworldindata.org/burden-of-disease?fbclid=IwAR0I88KzppGueXUvnzb4O6C6NsCzk1r9Ng79SpYq-TbtFH_x4G6Jm3_k_c0.
3. World health organisation. International agency for research on cancer 2022 2022 March 3. gco.iarc.fr/today/data/factsheets/populations/586-pakistan-fact-sheets.pdf.
4. Brooks FA, Keeney T, Ritchie C, Tolchin DW. Rehabilitation for symptom management for patients with cancer at the end of life: Current evidence and barriers to care. *Curr Phys Med Rehab Rep* 2021; 1-9.
5. Fettes L, Maddocks M. Physiotherapy in palliative care. *Oxford Textbook Palliative Med* 2021; 225.

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