# A South Wales Audit of Mortality within 30 Days of Palliative Radiotherapy

**Descriptor:**

For patients who are near to end of their lives, it is key to provide adequate palliation while limiting time spent visiting hospitals for treatment. While it is common practice to record 30 day mortality following chemotherapy across UK, this is less frequently evaluated for patients undergoing palliative radiotherapy.

**Background:**

Palliative radiotherapy is a commonly employed treatment for symptom and local control in patients with advanced malignancy. However, a selection of patients receiving palliative radiotherapy requires careful consideration to ensure quality of life is not compromised and significant benefit is gained. This principle of treating patients safely and avoiding harm is outlined in the Cancer Reform Strategy which specifically recommends data collection of 30 day mortality following palliative radiotherapy as an evaluation of treatment appropriateness.

## The Cycle

**The standard:**

There is no definitive standard consensus nationally, but acceptable 30 day mortality rates have been quoted between 10% and 20%.

**Target:**

A reasonable target may be considered to be less than 15%.

## Assess local practice

**Indicators:**

All patients undergoing palliative radiotherapy.

**Data items to be collected:**

1. Patients' demographics including age, performance status

2. Primary site of cancer

3. Indication for radiotherapy

4. Total dose, dose per fraction and number of fractions of radiotherapy

5. Date of death

**Suggested number:**

All patients undergoing palliative radiotherapy in a given time period.

**Suggestions for change if target not met:**

• Highlight subset of patients with higher mortality to clinicians

• Meticulous recording of performance status for all patients prior to considering treatment

• Consider single fraction of treatment or less number of fractions for patients with poorer performance status

• Repeat audit in 12 months

**Resources:**

• Audit lead with the assistance of clinical audit department staff to collate data and summarise

• Time: 8 hours to review the information and produce report

**References:**

1. Department of Health (2011) Improving Outcomes: A Strategy for Cancer. London, The Stationary Office.
2. Treece et al. Mortality following palliative radiotherapy - are we over-using fractionated treatments. Royal College of Radiologists, 2012.
3. Lees K et al. Audit of 30 day mortality following palliative radiotherapy. Royal College of Radiologists 2012.

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