



Project title

Availability and characteristics of caregivers of cancer patients:
Comparison between high and lower income settings.

Name of recipient

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Project topic

Availability and characteristics of caregivers of cancer patients:
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Introduction

Family caregivers of cancer patients receive little preparation, information, or support to perform their caregiving role. However, their psychosocial needs must be addressed so they can maintain their own health and provide the best possible care to the patient. Family caregivers often are expected to navigate an increasingly complex and fragmented health care system on their own and to find whatever help that may be available. In recent years, the caregiving responsibilities of family members have increased dramatically, primarily because of the use of toxic treatments in outpatient settings, the decline in available health care resources, and the shortage of health care providers.

In 2010, a met-analysis put some highlights on characteristics of caregivers among 29 studies that assessed interventions targeting family caregivers of cancer patients. Most of the caregivers were spouses (84%); the remaining 16% were comprised of adult children, siblings, other family members, or friends. The average age of adult caregivers was approximately 55 years (range, 18-92 years) and the majority were female (61%). Only one third of these studies included advanced stage cancer patients.

Goals or aims

This study aims to identify the characteristics and availability of caregivers of terminally ill cancer patients presenting to palliative care unit of a cancer center in a developing country as Egypt and compare them with those of a developed county with different culture as UK.

Description of the time spent at host institute

I spent 4 weeks with Palliative medicine consultant at Chelsea and Westminster Hospital in London Dr. Sarah Cox along with her team of registrars and clinical nurse specialists who were very helpful. I attended the ward rounds as well as doing my project through retrospective data collection from oncology patients' electronic records. Also, I had time to visit Trinity Hospice where terminally ill patients are cared for by palliative medicine physicians.

Conclusion

I was very lucky to have this opportunity to spend this time at Chelsea & Westminster Hospital as well as visiting a hospice where I saw how terminally ill patients are treated within a well organized health care system caring for the different needs of patient trying to improve service provided at my home institute.

Also I had the chance to complete the first part of my project which I am working on its second part in my home institute to be able to publish it soon.