



Choosing Wisely Canada is a campaign to help physicians and patients engage in conversations about unnecessary tests, treatments and procedures, and to help physicians and patients make smart and effective choices to ensure high-quality care.

For more information on Choosing Wisely Canada or to see other patient materials, visit www.choosingwiselycanada.org. Join the conversation on Twitter @ChooseWiselyCA

Care at the end of life for advanced cancer patients

When to stop cancer treatment

When you have cancer and you have tried many treatments without success, it can be very hard to know when to stop treatment. Sometimes, even with the best care, cancer continues to spread. It is hard to accept, but the best thing for you at that point may be to stop the cancer treatment. Instead, you could focus on getting care to keep you comfortable and out of pain.

This fact sheet explains how to know when it is time to stop treatment and focus on end-of-life care. You can use this information to talk with your doctor about your options and choose the best care for you.

Cancer responds best to treatment the first time.

When you treat a tumour for the first time, there is hope that the treatment will destroy the cancer cells and keep them from returning. If your tumour keeps growing, even with treatment, there is a lower chance that more treatment will help.

This is especially true for solid tumour cancers, like breast, colon, and lung cancer, and sarcoma. Doctors know a lot about how these cancers grow or shrink over time and how they respond



to treatment. They have found that treatment after treatment often offers little or no benefit.

When is it time to think about stopping cancer treatment?

If you have had three different treatments and your cancer has grown or spread, more treatment usually will not help you feel better or increase your chance of living longer. Instead, more treatment could cause serious side effects that shorten your life and reduce the quality of the time you have left.

Still, many people with advanced cancer keep getting chemotherapy—even when it has almost no chance of helping them. They end up suffering when they should not have to.

How do you know when to stop treatment?

It can be hard for the patient, caregivers and the doctor to talk about stopping treatment for the cancer and focus on end-of-life care. Your doctor may bring it up, but sometimes you may need to start the discussion. Your doctor should give you clear answers to any questions you ask.

You need to understand how advanced your cancer is. Ask your doctor about the stage of your cancer and how much it has spread. Ask about your prognosis, or how long you have to live. No one can know exactly, but your doctor usually should be able to tell you a range of months or years.

You need to know if more treatment for cancer will help you live longer. Ask your doctor to explain the risks and benefits of any treatment. Fighting the cancer may no longer be the best thing for you.

Sometimes, if there are no more known treatments and you want to continue other options, you can join a clinical trial. Clinical trials offer new, experimental treatments. Ask your doctor if you are eligible for a clinical trial or check www.canadiancancertrials.ca.

At any time during your treatment you can get help to relieve your symptoms and improve your quality of life. This is called palliative care and it is often important while going through cancer treatment. If you decide that you don't want more cancer treatment, then it's time to focus even more on palliative care.

Palliative care improves your quality of life.

Palliative care is an added layer of support to help you and your loved ones live with cancer. It does not treat your cancer, but it helps reduce your pain and other symptoms. It helps you and your loved ones get the most out of the time you have left together.

With palliative care, you can get physical, emotional, and spiritual support. You can get help to relieve pain, fatigue, anxiety, shortness of breath, nausea, and depression. Sometimes your doctor can provide palliative support. Other times a trained palliative care team works with you and your doctor to provide specialist care and the services you need. For example, palliative radiation may be appropriate even when a non-

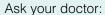
active treatment approach has been adopted to treat symptoms such as pain. Ask your oncologist or palliative care team if that may be an option for you.

Palliative care services may be available in your home, in a hospice facility, or at a hospital. Services include:

- Doctor and nursing care
- Pain management
- Medical equipment and medicines to ease symptoms
- Grief counseling for family and friends
- Social worker services
- Respite care, to give your caregivers a break

Questions to ask your doctor

Let your doctor know how much additional information you want to know about your cancer, and when you are ready to talk about end-of-life care.



- How long do I have to live if I have more treatment?
- What will happen if I do not have more treatment?
- What is the goal of more treatment?
- Will treatment stop or slow my cancer, or will it help with the symptoms?
- What is the best way to manage my symptoms and side effects?
- What can I do to make my quality of life better?
- Should I meet with someone who knows about palliative care?

If you would like to know more about palliative care:

- Ask your doctor for a referral to palliative care services available in your area.
- Visit www.virtualhospice.ca

© 2014 Consumers Union of United States, Inc., 101 Truman Ave., Yonkers, NY 10703-1057. Developed in cooperation with the Canadian Association of Medical Oncologists, Canadian Association of Radiation Oncology, Canadian Society for Surgical Oncology, Canadian Partnership Against Cancer for Choosing Wisely Canada. Portions of this report are derived from the Canadian Association of Medical Oncologists, Canadian Association of Radiation Oncology, Canadian Society for Surgical Oncology, Canadian Partnership Against Cancer's "Eleven Things Physicians and Patients Should Question" list. This report is not a substitute for medical advice. Neither the University of Toronto, Canadian Association of Medical Oncologists, Canadian Association of Radiation Oncology, Canadian Society for Surgical Oncology, Canadian Partnership Against Cancer nor Consumer Reports assume any responsibility or liability arising from any error or omission or from the use of any information in this report.