



CURRENT SITUATION OF END OF LIFE IN CHILDREN WITH CANCER AT THE PEDIATRIC ONCOLOGY UNIT OF KINSHASA

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INTRODUCTION

- Access to Pediatric Palliative Care: Very limited in LMIC
- In RDC ←have low cure rates and high death rates making palliative care relevant in Pediatric oncology unit
- First training on palliative care was carried out ← French Africa Pediatric oncology group in 2017
- Since 2017 French Africa Pediatric oncology group and University has been collaborating to improve care and early integration of palliative care

PATIENTS AND METHODS (1)

- The aim of this study is to assess the current situation of end of life of children and adolescent with cancer.
- Prospective cohort study
- Conducted at pediatric oncology unit of Kinshasa university hospital during.
- January 1st ,2017 to December 31th ,2022
- Population and sampling : - Children and adolescent aged to 0-17years old admitted for end of life

PATIENTS AND METHODS (2)

- Data collection:
 - Data was collected from patients files : once on admission during the treatment visit.
- variables : sex, age, residence, coverage for care, level of education of the parent, type of cancer, referral pattern, Period referral, Symptoms and treatment during the palliative phase, number of visits, median follow up time, median referral time.

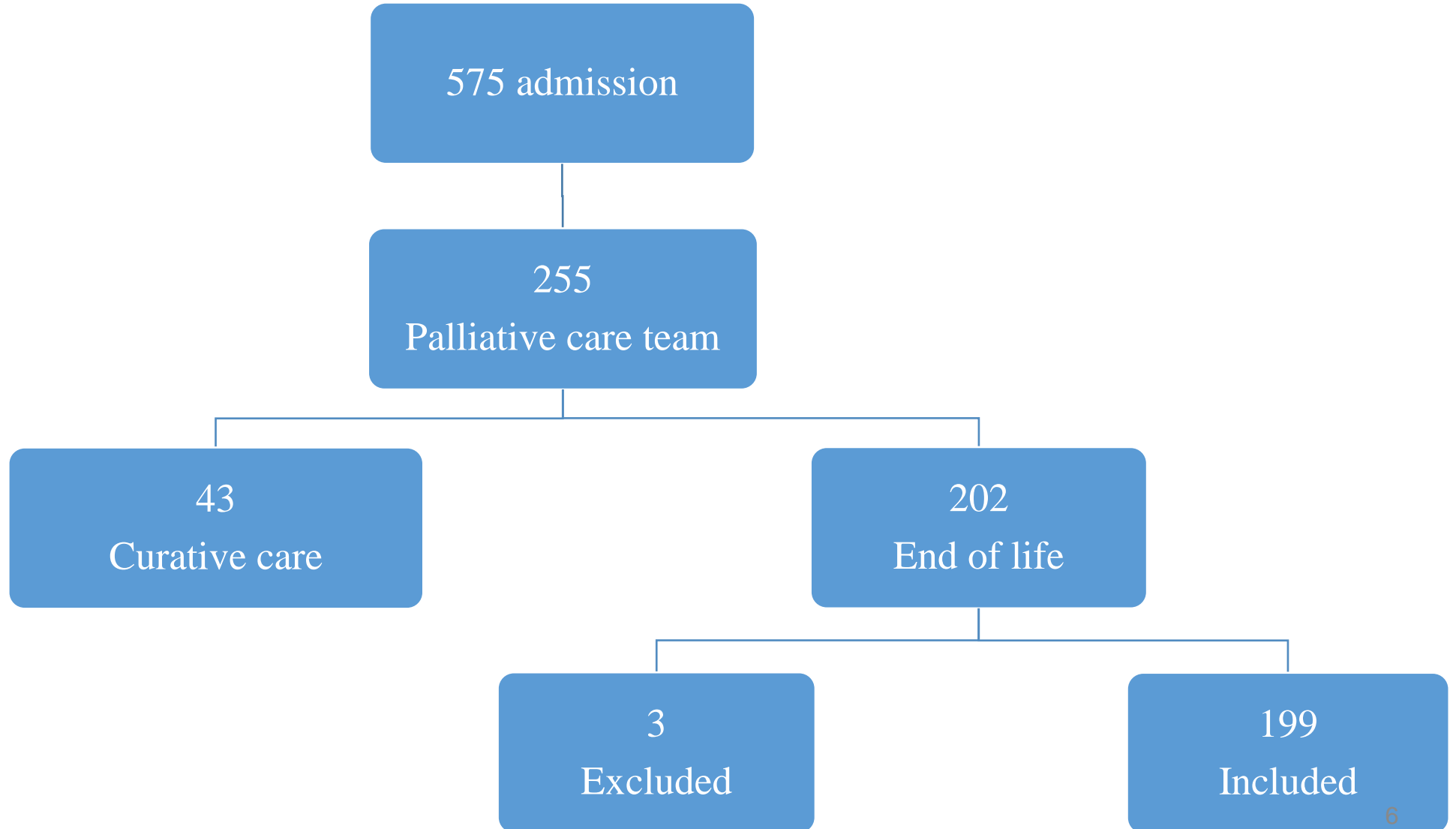
PATIENTS AND METHODS (3)

- **Operational definition :**

- Early referral : Referral within 30 days
- Intermediate referral: Referral between 31-365 days
- Delay referral : Referral over 365 days

- Metronomic chemotherapy :
 - 6MT+Metothrexate+Steroids for ALL
 - Aracytine C + hydroxy urea for AML
 - Vincristin IV/month + Dexamethasone tablet for cerebral tumor
 - Vincristin IV/month + Cyclophosphamide tablet + Steroids for other solid tumors
- Intensive chemotherapy : usual chemotherapy of therapy protocols
- Descriptive statistic was used

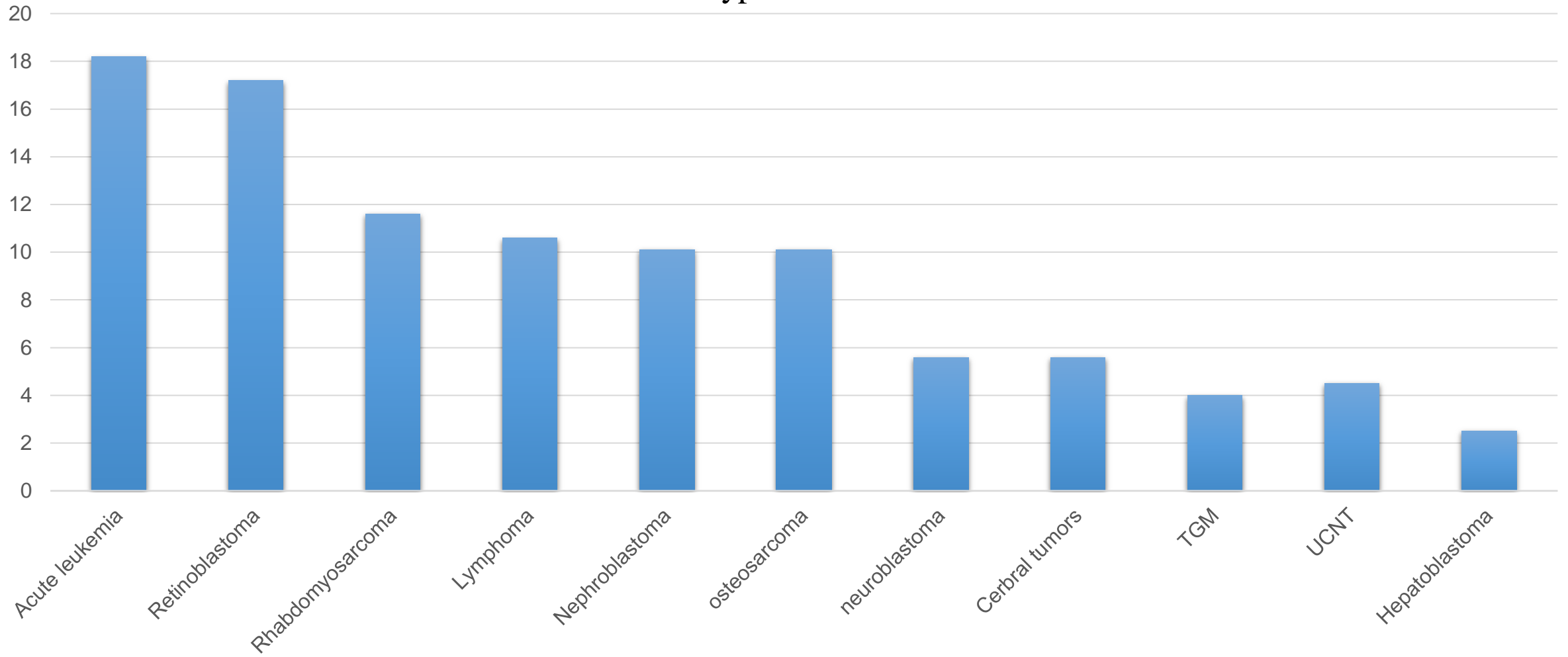
RESULTS



RESULTS(1)

- Median age 6,5 years
- Sex ratio 1, 23
- Residence: Kinshasa 68.5%, others provinces 24% , another country 7.5%
- Care cost coverage : 92.5 by families
- Low socio-economic level: 80.9% %.

Tablet 1: Type of cancer



RESULTS (3)

Parameters	n	%
Referral period		
Early referral	113	56,7
Intermediate referral	72	36,1
Delay referral	14	7,2
Referral pattern		
Advanced stage	66	33
Insufficient technical platform	37	18,6
Progression after abandonment	39	19,1
Progression despite treatment	33	17,1
Relapse	24	12,1

RESULTS (4)

Parameters	Average	Median	Minimum	Maximum
Median time diagnosis and referral	160	21(10- 75)	13	320
Median time referral and death	189	60(9.25-190)	1	780
Average number of visits in EOL phase	4.03	2	1	30
Average number hospitalization in EOL phase	0,85	1	0	4

RESULTS (5)

Treatment	All n=199(%)	Leukemia & Lymphoma n=58 (%)	Diagnosis		p-value
			Solid tumors n=130(%)	Brain tumours n=11(%)	
Chemotherapy	116(58,3)	44(75,9)	70(53,8)	2(18,2)	<0,0001*
Metronomic	85(42,7)	41(70,7)	42(32,3)	2(18,2)	<0,0001*
Intensive	36(18,1)	3(5,2)	33(25,4)	0(0)	
Morphine	76(38,2)	21(36,2)	50(38,5)	5(45,5)	0,926
Transfusion	105(52,8)	43(74,1)	62(47,7)	0(0)	<0,0001*
Paracetamol	136(68,3)	41(70,7)	86(66,2)	9(81,8)	0,507
steroids	125(62,8)	41(70,7)	73(56,2)	11(100)	0,005*

RESULTS (6)

Tramadol	75(37,7)	21(36,2)	52(40)	2(18,2)	0,344
Antibiotic	72(36,2)	40(69)	29(22,3)	3(27,3)	<0,0001*
Oxygen therapy	72(36,2)	21(36,2)	48(36,9)	3(27,3)	0,815
Sedation	54(27,1)	16(27,6)	33(25,4)	5(45,5)	0,354
Psychological support	81(40,7)	31(53,4)	46(35,4)	4(36,4)	0,064

RESULTS (7)

Symptoms						
Pain	161	45	107	9	0,746	
Asthenia	156	51	98	7	0,073	
fever	95	41	49	5	<0.0001**	
Vomiting	44	14	25	5	0,120	
Loss of appetite	118	36	77	5	0,589	
Bleeding	38	19	18	1	0,007*	
Anemia	99	45	54	0	<0.0001**	
Diarrhoea	11	4	7	0	0,652	
Dyspnoea	70	20	49	1	0,161	

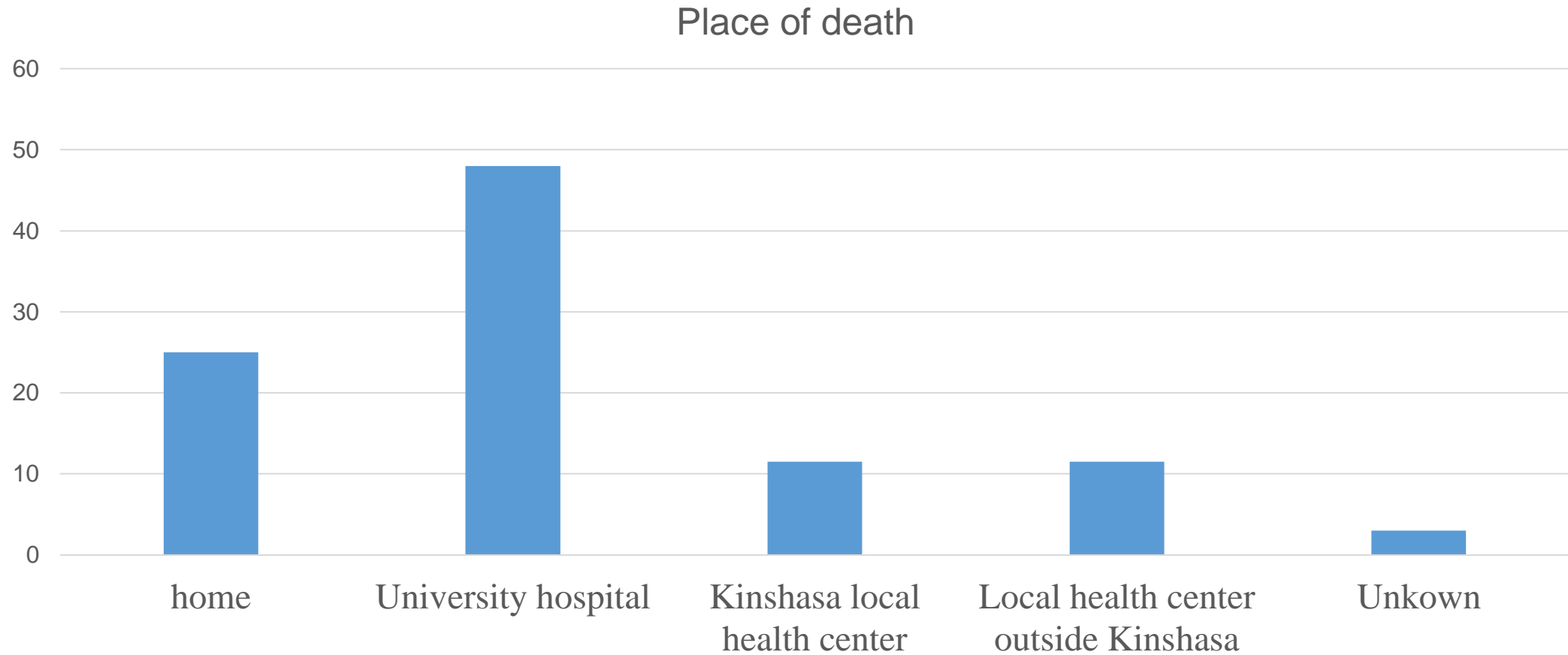
RESULTS (8)

Diarrhoea	11	4	7	0	0,652
Dyspnoea	70	20	49	1	0,161
Emaciation	104	22	81	1	<0.0001**
Nausea	19	3	13	3	0,070
Constipation	29	8	21	0	0,339
Headache	44	16	22	6	0,008*
Neuropathy	44	14	21	9	<0.0001**
Paresthesia	23	7	12	4	0,026*
Haematuria	9	3	5	1	0,696
Cough	19	5	14	0	0,486
Convulsion	28	9	16	3	0,364

RESULTS (9)

Depression	21	3	16	2	0,237
Anxiety	67	29	35	3	0,008*
Irritability	29	10	18	1	0,722

RESULTS (10)



CONCLUSION

The field Pediatric Palliative care has recently emerged in DRC

Significant improvement to access in pediatric palliative care

This work constitutes a unique inventory essential to improving practices, including a structured palliative approach