



<b>Title</b>	<b>Home-Based Chemotherapy for Cancer: Issues for Patients, Caregivers, and the Healthcare System</b>
<b>Agency</b>	AÉTMIS, Agence d'Évaluation des Technologies et des Modes d'Intervention en Santé 2021, avenue Union, bureau 1040, Montréal, Québec, Canada H3A 2S9; Tel: +1 514 873 2563, Fax: +1 514 873 1369; aetmis@aetmis.gouv.qc.ca, www.aetmis.gouv.qc.ca
<b>Reference</b>	Technology brief prepared for AETMIS, 2004 (AÉTMIS 04-02). Internet access to full text. ISBN 2-550-42584-7 (French edition ISBN 2-550-42578-2)

## Aim

To assess the effectiveness, safety, and costs of home-based chemotherapy for cancer control and cure in adults and children. To examine the issues of service delivery, access, patient preference, satisfaction, and quality of life.

## Conclusions and results

The evidence is insufficient to support the superior clinical effectiveness (based on survival, remission, or tumor control) of home chemotherapy. Evidence is also insufficient regarding cost savings or improvements to the patient's quality of life (although such improvements are consistently noted anecdotally by caregivers). Home delivery can be a safe and acceptable option for some cancer patients who choose it, but the approach is resource intensive and requires a well-integrated, collaborative team of specially trained healthcare professionals. The priority in rural areas should be 'closer- to-home' chemotherapy.

## Recommendations

- Evaluate existing home-based programs (criteria identified in report) to provide data on effectiveness, costs, and patient acceptability.
- Standardize policies and service components (organizational structure, staffing, training, communications, emergency support, patient followup, etc.) and deliver services through regional mechanisms.
- Build and maintain communication links among members of a multidisciplinary care delivery team.
- Anticipate the costs of transferring skills from oncology to community nursing.
- Develop a comprehensive model (a part of which is home delivery) for cancer care in Quebec.

## Method

Literature review: Semi-structured interviews with service providers in selected institutions in Quebec (n=10) and Ontario (n=6) on the benefits, barriers, facilitating

factors, and challenges in providing home chemotherapy. The Ontario interviews were for comparison as this province has similar demographics but a markedly different organizational structure for cancer care.

## Further research/reviews required

Comprehensive evaluations of current programs in Quebec. Research into necessary cost shifting among Quebec hospitals, home care services, patients, and caregivers that would accompany the expansion of home-based care. Documentation of patient quality-of-life and satisfaction factors.