

ABSTRACT

Introduction

Palliative care is an emerging medical specialty which require due attention of all healthcare professionals. Due to epidemiological and demographic transition, the number of non-cancer patients needing palliative care in rising trend and under the new health policy it is expected to manage each patient who needs palliative care at primary health care setting in future. To fulfill this need, medical officers with good knowledge, favourable attitudes and correct practices on non-cancer palliative care are required.

Objectives

To describe the knowledge, attitudes, practices and associated factors on palliative care for non-cancer patients among medical officers of primary and secondary health care institutions in Colombo district

Methodology

A descriptive cross-sectional study was conducted in primary and secondary health care institutions in Colombo district from 1st of July 2018 to 30th of September 2018. Estimated sample size was 452. A pre-tested self-administered questionnaire was used as the study instrument. Overall knowledge on non-cancer palliative care and overall knowledge on different components were presented in two categories as 'good' and 'poor'. Overall attitudes were presented in two categories as 'favourable' and 'unfavourable'. Responses to individual practices were presented using frequency tables. Overall knowledge, overall attitudes and six selected practices were cross analyzed with selected factors to assess their association. Chi square test was used as the statistical test for associations. Fisher's exact test was used for the variables which had expected cell counts less than 5. A probability value of <0.05 was considered as significant for both tests.

Results

All medical officers (n=457) who were eligible to participate for the study was recruited and response rate was 85.6%. Majority of respondents were females (58.3%), in age group 36 - 45 years (40.9%) with a mean age of 39 (SD=7.4) years, grade II medical officers

(67.8%) and had ≤ 10 years of working experience (59.4%), 23.3% had a postgraduate degree, 21.2% have had an undergraduate training on non-cancer palliative care and only 6.9% had attended training programmes on non-cancer palliative care.

Majority (53.7%) had poor level of overall knowledge on non-cancer palliative care and on all the assessed components except for the concept of palliative care. Good level of knowledge was significantly associated with younger age ($p=0.04$), service duration ≤ 10 years ($p=0.009$), possessing a postgraduate qualification ($p=0.02$), working in a medical unit ($p=0.01$), attending training programmes on non-cancer palliative care ($p=0.009$), updating knowledge on non-cancer palliative care ($p=0.006$), ever managed non-cancer palliative care patients ($p<0.001$).

Majority (87.7%) had favourable attitudes and it was significantly associated only with previous history of working in a tertiary care institution ($p=0.04$).

Majority (76%) had managed non-cancer patients who needed palliative care. Out of them majority had discussed disease progress and prognosis with the patients (87.2%) and patients' families (96.6%), had never involved community support centres (66.0%) and local GPs (68.7%) for the management. Discussing disease progress with non-cancer patients ($p<0.001$) and discussing care at home when discharging non-cancer patients ($p=0.007$) were significantly associated with favourable attitudes. Involving community support services were significantly associated with attending training programmes on non-cancer palliative care ($p=0.04$).

Conclusions and recommendations

Overall knowledge on non-cancer palliative care was poor among majority of medical officers of primary and secondary health care institutions in Colombo district. Good level of knowledge was associated with postgraduate qualifications and attending training programmes. Majority of medical officers had favourable attitudes towards non-cancer palliative care and it was associated with previous working experience at a tertiary care institution. Favourable attitudes and adequate training had resulted in good practices in non-cancer palliative care.

More in-service training programmes on non-cancer palliative care should be conducted and non-cancer palliative care should be incorporated into undergraduate curriculum.

Key words: Non-cancer palliative care, Medical officers, Primary health care, Secondary health care