

National Institutes of Health Funds Study of Spiritual Care in Palliative Care

A new five-year study entitled “Dignity Therapy RCT Led by Nurses or Chaplains for Elderly Cancer Outpatients” has been approved by the National Institute of Health’s (NIH) National Cancer Institute and National Institute of Nursing Research. This is one of the first times NIH has funded a study that includes a chaplain-led spiritual care intervention. The study is led by a team of three multiple principal investigators: Diana Wilkie, Ph.D., RN, FAAN (University of Florida), Linda Emanuel, M.D. (Northwestern University), and George Fitchett, Ph.D. (Rush University Medical Center).

The goal of the study is to improve spiritual care outcomes for elderly patients receiving palliative care and facing a cancer diagnosis by optimizing a nurse-led or chaplain-led intervention focused on patient dignity. The study will be conducted at six sites across the country. Total funding for the project is in excess of \$3 million.

Research shows that palliative care, including pain reduction or treatment of side effects, can result in improved longevity and more tolerable treatments for patients with terminal or chronic conditions like cancer. Dignity Therapy is known from other studies to be well accepted by patients but is not widely used and it remains a question how best it can work in real-life settings. It is also unclear if Dignity Therapy should be led by nurses or chaplains, the two disciplines within palliative care most available to provide Dignity Therapy. Therefore, the investigative team proposed a rigorous study to evaluate the effects of usual outpatient palliative care, with added nurse-led or chaplain-led Dignity Therapy to assess Dignity Therapy’s impact on patient dignity related outcomes, including spiritual well-being.

“Today’s health care system tends to focus on expertise surrounding the disease more than on listening to the person and their families and helping them express and achieve their goals, including those related to spirituality,” Wilkie said. “We hope the Dignity Therapy will allow each of the study patients to tell their stories, prepare a legacy in a way that improves their quality of life, and offer the opportunity for families to understand a patient’s perspective.”

According to the Center to Advance Palliative Care (CAPC), approximately 90 million Americans are living with serious illness, with the number expected to more than double over the next 25 years with the aging of the baby boomers. According to a 2010 study reported in the *New England Journal of Medicine*, lung cancer patients receiving early palliative care had less depression, improved quality of life and survived 2.7 months longer than those receiving usual cancer care. Also, according to a study reported in the *Journal of the American Medical Association*, people with advanced illness report that being at peace with God is as important as freedom from pain.

The research team will study 560 elderly patients through six outpatient palliative care facilities across the U.S. All sites will begin with usual palliative care with later staggered random assignment to Dignity Therapy. At the conclusion, the team will compare the usual care groups and the Dignity Therapy groups for effects on patient outcomes and spiritual-care processes. They also will see if physical symptoms and spiritual distress affect the patient outcomes.

Study co-investigators include Yingwei Yao, Ph.D.(University of Florida,) and the Rev. George Handzo (Health Care Chaplaincy Network). The six sites where the study will be conducted, and their site directors, include: Lucas Beerepoot, M.D. (University of Florida), Tammie Quest, M.D. (Emory University), Marvin Delgado Guay, M.D. (MD Anderson Cancer Center), Joshua Hauser, M.D. (Northwestern

University), Sean OMahony, M.D. (Rush University Medical Center), and Michael Rabow, M.D. (University of California, San Francisco).

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