



## Service Priorities and Programmes Electronic Presentations

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### **Psychological Wellbeing in Palliative Patients and the Need for Specific Psychological Screening Tool on Emotional Distress**

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#### **Introduction**

Providing quality palliative care has tremendous importance in advanced society as it allows people to have reduced sense of suffering, and come to terms with significant life changes to die with dignity. Early identification and impeccable assessment are essential for providing suitable treatment to address palliative patients' psychological needs.

#### **Objectives**

This study aimed to understand psychological wellbeing of palliative patients in Hong Kong regarding their perceived social support, meaning of life, emotional distress, and hospital care, in order to provide tailored psychological service to match their needs and enhance their quality of life.

#### **Methodology**

A retrospective study was performed on the data derived from the Seamless Palliative Care Service (SPCS), Tung Wah Hospital (TWH) from November 2012 to December 2015. Ninety-nine patients with terminal hepatobiliary and pancreatic cancer were included (male=75, female=24). All of them were assessed by a self-report measure—Psychological Wellbeing Scale for Patients (PWS-P) (Wu, et al., 2009) which consists of 9 items measuring 4 aspects including Social Support (SS), Life Meaning (LM), Emotional Distress (ED), and Hospital Care (HC). All items ranged from 0 to 10. Cutoff scores for individual subscales were below 6 for SS, below 5 for LM, above 5 for ED, and below 8 for HC.

#### **Result**

Mean age of male and female were 72.33 (SD=12.81) and 66.07 (SD=11.81) respectively. No significant difference in age was observed between gender groups. Overall results showed mean scores of 8.48 (1.75 SD) in social support, 7.84 (1.79 SD) in life meaning, 5.74 (2.85 SD) in emotional distress, and 8.60 (1.62 SD) in

hospital care. Eleven out of 103 participants (10.68%) had below cutoff score in social support; Five (4.85%) had below cutoff score in life meaning; Fifty-seven (55.34%) had above cutoff score in emotional distress; and twenty-two (21.36%) had below cutoff score in hospital care. The present study employing existing psychological screening tool PWS-P suggested palliative patients generally had satisfactory social support, life meaning, and hospital care when admitted to the hospital. However, more than 55% of participants showed significant emotional distress despite life meaning, social support, and hospital care were deemed adequate. The present study may lend support to the need for further assessment on emotional distress that might be specific to palliative patients. Standalone measures for end-of-life emotional distresses such as death anxiety and depression could be considered for psychological service matching in palliative settings.