

Do Adult Persons with Chronic Psychiatric Conditions Receive Fair Access to Specialist Palliative Care? Results from a Systematic Review

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Background: The linkages between palliative care (PC) and psychiatry are widely described in the literature. Little is known on whether persons with chronic psychiatric conditions have access to specialist PC.

Aims: To review the existing evidence about PC for persons with chronic psychiatric conditions with respect to the access to specialist PC and its specificities.

Methods: Systematic review, following PRISMA 2009. Data sources: PubMed, Web of Science, PsycINFO, EBSCOhost, CINAHL, MEDLINE, Nursing & Allied Health Collection: Comprehensive, Database of Abstracts of Reviews of Effects, Cochrane Central Register of Controlled Trials, Cochrane Database of Systematic Reviews, Cochrane Methodology Register, Library, Information Science & Technology Abstracts, MedicLatina, Health Technology Assessments, NHS Economic Evaluation Database, PsycARTICLES, Psychology and Behavioral Sciences Collection. Search terms: 'palliative care' OR 'end of life care' AND 'psychiatry' OR 'mental illness' OR 'mental health' OR 'mental disorder' OR 'chronically mentally ill' OR 'serious mental illness' OR 'psychiatric disorders' OR 'severe mental illness'. Inclusion criteria: studies focusing on PC provision for adults with chronic psychiatric conditions, in English, German, Spanish and Portuguese. Articles independently reviewed by two researchers. Quality appraisal was performed.

Results: 293 articles retrieved, 4 met inclusion criteria. Three articles focused on professionals' perspectives about palliative and end of life care provision, suggesting the need for further education and collaboration between psychiatry and PC. The other article revealed that

patients with psychiatric conditions were less likely to receive specialist PC when compared to other patient groups.

Conclusions: This study shows the lack of research on the access and provision of PC for persons with chronic psychiatric conditions. It emphasizes the ethical issue of justice in the access to PC at the end of life.

Pereira, S. M., Antunes, B., & Azenha, S. (2019). Do adult persons with chronic psychiatric conditions receive fair access to specialist palliative care? Results from a systematic review. *Palliative Medicine*, 33(1).