

Advanced Care Planning Prior to Oncologic Surgery: An Assessment of Utilization and Implications

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INTRODUCTION

- Healthcare in the US is moving towards value-based care.
- Advanced Care Planning (ACP) allows patients to engage in goal-directed care.
- ACP can improve outcomes and reduce costs for patients.
- However, its utilization and implications in the perioperative setting are unknown.

POPULATION STUDIED

- Patients who underwent potentially curable oncologic surgery within a regional health system from January 2015 to December 2021.

METHODS

- We identified patients who had ACP based on procedural codes indicative of formal ACP.
- Patients were categorized by the timing of ACP:
 - Preoperative (Preop-ACP)
 - Postoperative (Postop-ACP)
 - None.
- To evaluate the potential value implications of ACP, logistic regression-based propensity scores were used to match a cohort of breast cancer patients.

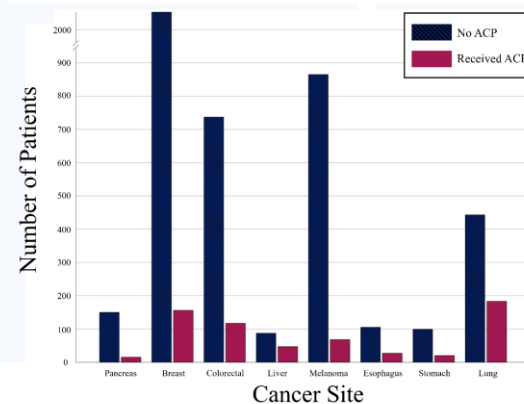
RESULTS

- Out of 5,415 surgery patients, 452 (8.4%) received ACP
 - 70 received Preop-ACP
 - 382 received Postop-ACP.
- Patients who received ACP were 73±10 years, 98% white, and 61% female.
- Of all patients with age > 80 years (n=623), 26% received ACP.
- Of those with a Charlson Comorbidity Index > 2 (n=70), 34% received ACP.
- Of all patients with advanced stage disease (clinical stage III or higher; n=556), 30% received ACP.
- The highest ACP utilization was seen in patients with liver (n=47, 35%) and lung (n=183, 29%) cancer.
- The highest Preop-ACP utilization was seen in patients with breast cancer.
- Propensity score match analysis:
 - 20 Preop-ACP breast cancer patients were matched with 20 breast cancer patients having either Postop-ACP or no ACP
 - 85% underwent breast conservation surgery
 - Total 30-day healthcare utilization was \$7,392.49 (\$5,437.88 - \$11,443.68) for Preop-ACP vs \$10,484.47 (\$6,085.74 - \$15,825.05) for Post-ACP, p=0.984.

CONCLUSIONS

- Despite the known benefits of ACP for cancer patients, it is rarely utilized in the perioperative setting.
- Given the potential benefits of ACP, a deeper exploration of the implications of ACP in the preoperative setting is warranted.

ACP Utilization Within A Large Integrated Cancer Network



CONTACT INFORMATION

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