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Presentation 2

CAUSE OF DEATH IN LONG-TERM SUBSTANCE USE: A SCOPING STUDY AND REVIEW OF THE IMPLICATIONS FOR END OF LIFE AND PALLIATIVE CARE LUCY WEBB & SAM WRIGHT

Presenter's email: l.webb@mmu.ac.uk Introduction:

Older people who use substances are more likely than general populations to have complex non-cancer pathologies which are under-represented in palliative care services. Our work explores mortality and morbidity relevant to end of life care and reveals discrepancies in provision for people who use substances, identifying possible explanations. We make recommendations for improved governance to inform policy and practice change. Method: A four-stage strategic scoping study was conducted: (i) identification of evidence sources; (ii) scoping – identify key variables relating to substance use and end of life care; (iii) screening evidence; and (iv) content analysis of datasets and reports. We then conducted a literature review structured by the parameters identified in the scoping study, particularly gaps in the evidence and follow-on questions. Results: Palliative care data that specifies whether a person has a history of substance use is not routinely recorded. People with noncancer conditions are less likely to access palliative care, and substance-dependent users present at a later-stage in the illness. However, the over-representation of cancer in palliative care may be due to the predictability and manageability of cancer progression rather than discrimination between different conditions. Discussion and Conclusions: People with a history of substance use face barriers to accessing specialist services for medical/operational reasons as well as self-stigma. There is currently no focus on people with these histories and little monitoring of service take-up or referral pathways. This leads to reduced visibility of their particular needs, especially psychosocial needs to address the stigma they and their families may anticipate.