


PHYSIOTHERAPEUTIC PERFORMANCE IN PALLIATIVE CARE: AN INTEGRATIVE REVIEW ON THE EXISTENCE OF PHYSIOTHERAPEUTIC PROTOCOLS FOR PALLIATIVE CARE

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ABSTRACT

Physiotherapy is a fundamental part of the multiprofessional team to promote quality of life and comfort to patients in palliative care, acting in the assessment, prevention and treatment of the dysfunctions presented, being essential to provide physical, emotional and functional comfort to patients. The present study is characterized as an integrative review guided by the following question: "In view of scientific publications, is it possible to establish a physical therapy protocol for palliative patients?". Thus, the objective of the study is to research the scientific productions about the physiotherapeutic techniques used in palliative care in the face of a multiprofessional work. An integrative literature review was performed in the PubMed (National Library of Medicine and National Institutes of Health), VHL (Virtual Health Library), PEDro (Physiotherapy Evidence Database) and SciELO (*Scientific Electronic Library Online*) databases, using the following descriptors: ("*physiotherapy*" AND "*palliative care*" AND "*oncology*" AND "*neoplasm*"). Including in the study only the journals 2017 to 2023 as publication date limits. Through the studies analyzed, it was observed that physical therapy acts actively in the face of the main complications reported by patients in palliative care, using techniques such as kinesiotherapy, aerobic exercises, resistance exercises, respiratory physical therapy techniques, neurofunctional physical therapy, TENS, therapeutic massage, compressive bandaging and myofascial release. It was possible to observe, through analyses and studies, that the intervention of physiotherapy plays a crucial role in palliative care, being considered an essential and complementary part within the multidisciplinary context of treatment. The physiotherapy approach in this scenario aims not only to relieve physical symptoms, such as pain and fatigue, but also to promote quality of life and emotional well-being for patients. However, when considering the development of specific protocols for certain conditions presented by patients in palliative care, we are faced with significant challenges, where the scarcity of well-founded studies in this area is notable, which makes the definition of evidence-based guidelines and practices a complex task. The diversity of cases and the individuality of each patient also contribute to the difficulty in establishing standardized protocols.

Keywords: Physical therapy. Quality of life. Interventions. Studies. Terminality.

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INTRODUCTION

Palliative care refers to a series of multidisciplinary conducts aimed at patients with incurable diseases, aiming to improve the quality of life of these patients, promoting the prevention and relief of pain complaints through the identification, evaluation and treatment of pain and symptoms that affect not only the patient's physique, but also the entire psychological and social context involved in the condition presented (WHO, 2002).

All individuals affected by life-threatening pathologies, whether acute, chronic, and at any age, are suitable for palliative care (INCA, 2022). According to PALMEIRA et. al. 2011, palliative care actions apply to any active, progressive disease or that threatens the continuity of life, that is, they extend to cases in which death can be constituted by a process of natural evolution in relation to illness, even if it lasts for years.

The patient's diagnosis is a determining factor for the allocation of palliative care to patients affected by an incurable disease. In view of the development of the present condition, establish a prognosis that helps in the adaptation of the affected patient to palliative care, where the need to carry out practices aimed at the patient's better quality of life was observed, in which the palliative approach aimed at the patient's better condition in its current time is expanded (INCA, 2022).

In view of the reported fact, it is necessary for patients with conditions beyond the possibility of cure to conduct themselves aimed at improving well-being, in which they provide these individuals with basic comfort aimed at daily comfort. Thus, palliative care is defined as approaches that promote the quality of life of patients and their families, who face diseases that threaten the continuity of life, through prevention and relief of suffering (WHO, 2017). These are approaches that require the comprehensiveness of knowledge inherent to the various specialties, enabling the performance of clinical and therapeutic conducts in various areas of knowledge in the health area, with physiotherapy as one of the components.

Physiotherapy is of paramount importance in palliative care, presenting a wide variety of resources for carrying out conducts aimed at the patient's quality of life (INCA, 2020). That said, physiotherapy is an essential component in the multidisciplinary team for the development of palliative care, covering numerous areas of action in which they enable the patient to improve the clinical condition and, consequently, the perspective of promoting their well-being.

Thus, it is necessary to understand the protocols exercised in the physical therapy practice in palliative care in order to establish the necessary knowledge for the formation of specific conducts based on the apparent situations in the care of patients with the presence



of non-curable diseases. Thus, the objective of the present study was to analyze scientific productions aimed at carrying out physiotherapeutic conducts aimed at symptom management in patients in palliative care situations.

METHODOLOGICAL PATH

CONTEXTUALIZATION OF THE OBJECT

This is an integrative review based on a literature search using the following descriptors: *physiotherapy*, *palliative care*, *oncology and neoplasm*, which aimed to search for physiotherapeutic methods used in palliative care.

CHARACTERIZATION OF THE STUDY

For the development of the study, steps were determined to guide the research, namely: determination of the guiding question; organization of keywords; inclusion and exclusion criteria; literature search; analysis of the studies included in the search patterns; identification of information pertinent to the research; interpretation of the results and conclusion of the synthesis of the knowledge produced.

The following standards were used as eligibility criteria: articles that included physiotherapeutic methods in palliative care in adults or children/adolescents, clinical trial articles, and systematic review articles, available in English, Portuguese, and Spanish, including articles from 2017 to 2023 as the publication date limit. The following exclusion criteria were determined: theses, dissertations, letter articles and case studies. The searches in the databases were carried out between September 2023 and January 2024, being carried out only by the author himself.

DATA COLLECTION INSTRUMENT

The searches were carried out in the following literary databases: PubMed (National Library of Medicine and National Institutes of Health), VHL (Virtual Health Library), PEDro (Physiotherapy Evidence Database) and SciELO (*Scientific Electronic Library Online*). To standardize the searches, the Boolean operator was used with the following scheme ("*physiotherapy*" AND "*palliative care*" AND "*oncology*" AND "*neoplasm*")

The following information was collected in the studies: author, year, type of study, number of individuals/studies analyzed, age, and the therapy used in palliative care in adults and children/adolescents.

ANALYSIS OF THE RESULTS

The final result of the studies selected after selection in the databases totaled 12 scientific articles, where dissertations, theses, case reports and articles in which they were related to physiotherapeutic approaches in palliative care for adults or children/adolescents were considered as exclusion criteria: clinical trial studies and systematic reviews available in English, Portuguese and Spanish, covering the period from 2017 to 2023 as a publication limit. Taking into account the inclusion and exclusion criteria defined for the elaboration of the study, the articles were extracted directly from the aforementioned databases and evaluated for their eligibility to answer the study's guiding question, as shown in Figure 1.

Figure 1. Flowchart for eligibility of scientific articles.

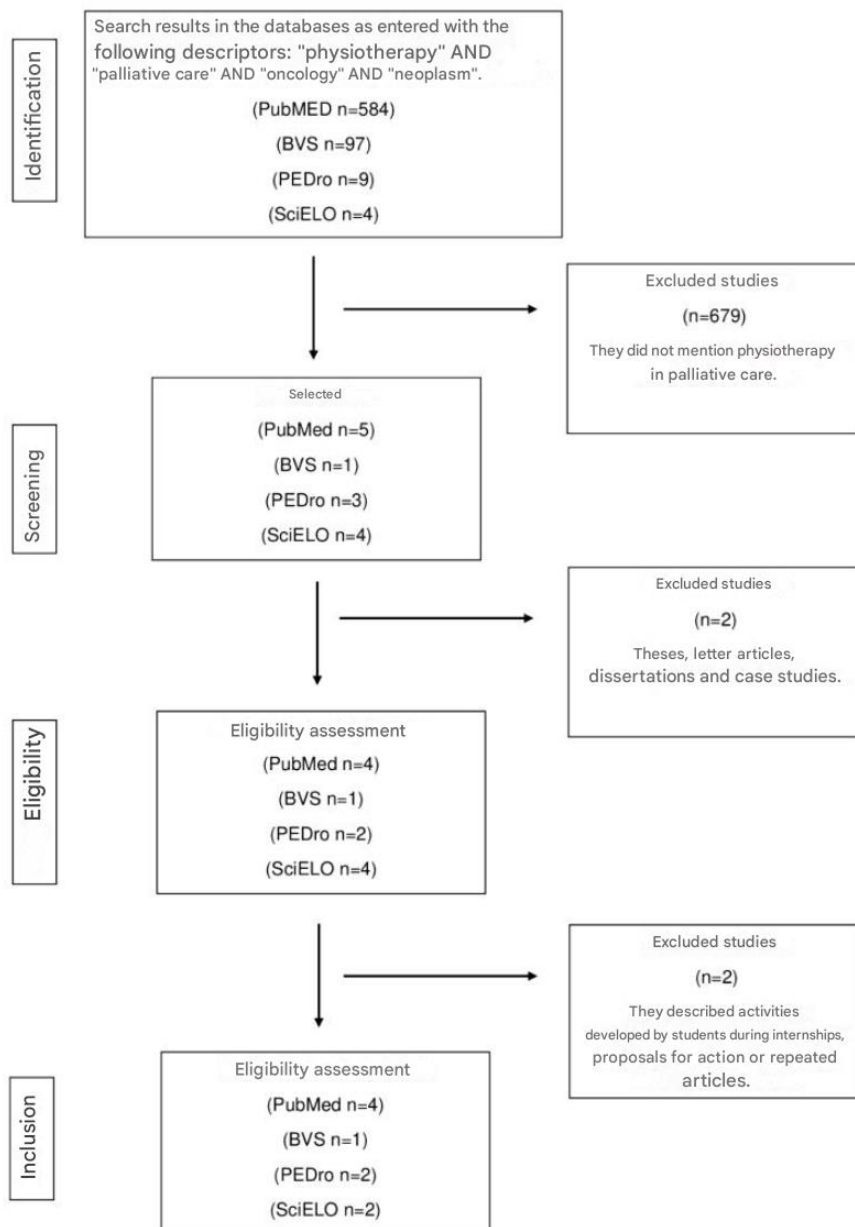




Table 1. Studies defined as literature reviews and conduct guides.

Author	Year	Type of study	Local	No.	Objective	Description of results
VIRA, et al.	2020	Systematic review	India	9	To review the role of physical therapy and its effects in palliative care of patients with advanced cancer.	It has been seen that a structured protocol of exercise, massage therapy, TENS, and compression bandages are helpful in relieving the symptoms experienced by advanced cancer patients in palliative care. However, the quality of the studies ranged from low to moderate.
CAMPOY, et. al	2021	Systematic review	Spain	7	To gather, analyse and critically evaluate the available scientific evidence on physiotherapy in children requiring palliative care through a systematic review of studies published in the last 10 years in the following databases: PubMed, Cochrane Library, PEDro, CINAHL and Scopus.	Its evidence was respiratory physiotherapy and techniques aimed at the control of neurological symptoms, such as the prevalent specialties in pediatric palliative care. A major weakness of the study was the difficulty in searching for scientific evidence that fit the established design.
BUSTOS, et. al	2020	Systematic review	Colombia	5	To identify the effects of physical therapy intervention on quality of life and symptom control of cancer patients in palliative care.	He stated that physical therapy intervention is effective in patients with advanced cancer and the impact on the quality of life of these patients, but he reports the low scientific evidence in the area, reporting that there is a need for more research in the area.
SILVA, et. al	2021	Integrative review	Brazil	12	To analyze the scientific productions regarding the performance of physiotherapy in palliative care in cancer patients.	The study evidenced the relevance of physiotherapy in palliative care, reporting its importance at all levels of health. The scarcity of studies in the area was reported, requiring a greater scope of research.
MOREIRA, et. al	2021	Integrative review	Brazil	12	We searched the literature for studies that use kinesiotherapy to treat, attenuate, and improve fatigue in cancer patients, in addition to identifying the best intervention for clinical practice with this group of patients.	He reported that the use of physical therapy with kinesiotherapeutic exercises is essential for the rehabilitation of these patients, making it necessary to further research with clinical trials, including the application of physical therapy with kinesiotherapeutic exercises.

n - Number of samples used to carry out the author's research.

Table 2. Studies defined as observational and experimental studies.

Author	Year	Type of study	Local	No.	Objective	Description of results
SCHUNK et. al.	2020	Accelerated pragmatic randomized controlled trial	Germany	160	The effectiveness of the Munich Breathlessness Service (MBS), which integrates palliative care, respiratory medicine and physiotherapy, was tested in the BreathEase trial in patients with chronic shortness of breath in advanced disease and their caregivers. Exercises and positions to facilitate breathing were performed by the physiotherapy team; breathing techniques; exercise plan and assessment of the need for medical help.	The results of the study highlighted the effectiveness of the Munich Breathlessness Service (MBS) in reducing the burden caused by chronic shortness of breath in advanced disease in a wide range of patients. However, it was seen that additional evaluation is needed in subgroups of patients and with a longitudinal perspective.
PYSZORA et. al.	2017	Randomized controlled trial	Poland	60	To evaluate the effect of a physical therapy program on cancer-related fatigue and other symptoms in patients with a diagnosis of advanced cancer.	The exercise program caused a significant reduction in fatigue in terms of fatigue severity and its impact on daily functioning. In addition, the physical therapy program improved the patients' overall well-being and reduced the intensity of coexisting symptoms, such as pain, drowsiness, lack of appetite, and depression.
POORT et. al.	2017	Randomized controlled trial	Holland	219	To evaluate the efficacy of graded exercise therapy and cognitive behavioral therapy compared to usual care in reducing fatigue in patients with incurable cancer.	It is concluded that gradual exercise and cognitive-behavioral interventions look promising in reducing the severity of fatigue based on their efficacy in disease-free cancer patients and in patients receiving cancer treatment with curative intent.
LONGARAY et. al.	2021	Quasi-experimental study	Brazil	11	To verify the effects of a physiotherapy protocol in individuals with hematological cancer.	The results showed that it is possible to use a physical therapy protocol that adapts to the hematological profile and clinical conditions of the patient in this area, with correlations between several functional variables evaluated, although more studies

						are needed. A predominant factor for this study is its low number of samples, directly implicating the effectiveness of the results.
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Tables 1 and 2 show the objectives of the selected studies after filtering based on the criteria analyzed. From the results obtained, it is possible to analyze the physiotherapeutic performance in the midst of palliative care, outlining the effectiveness of the conducts aimed at resolving the main symptoms reported by the patients, in which it will be possible to establish a standard in the conducts and, finally, the effectiveness of the techniques used to control the symptoms of patients with terminal diseases.

The main objective of physiotherapy in this patient population is aimed at improving quality of life, so that it relieves symptoms, discomfort and difficulties that make it impossible for the individual to function at an optimal level (PYSZORA et al., 2017). Thus, it is seen the need to implement physical therapy in numerous situations presented by the patient, aiming at its improvement in a broader context, where it can provide the patient with the possibility of performing activities of daily living.

In order to direct palliative care in a given patient, it is first necessary to carry out a detailed assessment of the clinical condition and aspects that interfere with the patient's quality of life, where the main symptoms reported are analyzed and thus a direction of conduct. In the study by VIRA et al. (2020), the predominant symptoms in palliative patients who need physical therapy care are pain complaints, decreased physical function, fatigue, lymphedema, and sleep disorders related to shortness of breath, in which it is possible to evidence that there is a link in the appearance of the aforementioned conditions.

According to POORT et al. (2017), fatigue is one of the most commonly reported symptoms by patients with incurable cancer, in which they are suitable for palliative care. In view of the reported fact, the study by PYSZORA et al. (2017) observed the effectiveness of a physical therapy program to reduce fatigue, where active exercises for upper and lower limbs, myofascial release techniques and proprioceptive neuromuscular facilitation (PNF) techniques were performed over a period of two weeks, in which six sessions of individual therapy were performed for a time of thirty minutes.

Like PYSZORA et al. (2017), the study by POORT et al. (2017) established an exercise program to reduce fatigue in patients with cancer, the following cancers: breast, colorectal, prostate, renal cells, bladder, endometrium, ovarian, cervical, bone and soft tissue cancer, or melanoma. Interventions included resistance exercises and aerobic



training over a period of twelve weeks. It obtained significant results for the increase of the physical capacity of the patients and eventually the reduction of the fatigue condition, establishing the training load based on the patient's physical capacity, both in resistance training through the maximum repetition test (RM), and in aerobic training in the face of the heart rate reserve (HRR).

Allied to the concept of kinesiotherapy, MOREIRA et. al. (2021) defines that aerobic, active, resisted, and functional exercises applied to patients with oncological fatigue should be from short to long term, being at least three weeks to two years, with ten to thirty minutes, three to five days a week, with repetitions of eight to twelve, and sets of three, which develop a decrease in fatigue levels and also reduce coexisting symptoms, providing a better quality of life and functional capacity for these patients.

Highlighting pediatric palliative care, the study by CAMPOY, et al. (2021) saw the direction of physical therapy techniques aimed at acting on Cerebral Palsy, where it is concluded that respiratory physical therapy and techniques aimed at controlling neurological symptoms are the most prevalent specialties, evidencing techniques aimed at postural management due to the reduction of spasticity and deformities in the child, in addition to techniques aimed at neurodevelopment and sensory stimulation.

Considering the aspect of shortness of breath in palliative patients, MENDES et. al. (2020) relates the use of strategies for comfort and management of this symptom, such as: maintaining a quiet and ventilated environment, with windows open, cooling the patient's face using cold compresses, wearing comfortable clothing, postural adjustment, preferably with an elevated headboard, and relaxation techniques. In more complex clinical cases, it is evident that the use of respiratory physiotherapy techniques is indicated, in which it is necessary to evaluate the specificity of the case.

Still on respiratory treatment, SCHUNK, et. al. (2020) defined that a multidisciplinary protocol aimed at patients affected by shortness of breath during exertion or at rest resulting from any advanced, life-limiting and progressive disease is effective for improving the clinical condition. In this study, physical therapy was performed based on exercises and positions to facilitate breathing; breathing techniques; exercise plan and assessment of the need for medical help over a period of six weeks.

FINAL CONSIDERATIONS

Despite the positive results observed in the studies, it is important to recognize that the formalization and standardization of the techniques used in palliative care is unfeasible due to the low number of well-founded studies in the area.



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