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## Refusal treatment and therapy discontinued and its predictors in colorectal cancer

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The incidence of colorectal cancer in Taiwan continues to increase. The treatment and thus survival of colorectal cancer patients can be improved by a complete therapy. We aimed to investigate the status and associated factors of treatment refusal and discontinuation in colorectal cancer patients. A total of 3441 cases of colorectal cancer from 2010 to 2012 were retrieved from the system of a medical institute in northern Taiwan using the secondary analysis method in order to investigate patients who refused or discontinued treatment. A total of 68 (1.97%) and 278 patients (0.08%) refused and discontinued treatment, respectively. On multivariate logistic regression analysis of patients who refused the treatment, the probability of treatment refusal in rectal cancer patients (p=0.02) was 2.194 fold higher than in colon cancer patients. The probability of treatment refusal was 1.071 fold higher with each additional year of age (p<0.001). On multivariate logistic regression analysis of patients who discontinued treatment, the probability of treatment discontinuation was 1.016 fold higher with each additional year of age (p=0.004); the patients living outside northern Taiwan (p<0.001) was 0.506 fold higher than the probability of treatment completion; the patients with advanced cancer (p<0.001) was 3.606 fold higher than the probability of treatment completion. We found that treatment refusal in cancer patients was significantly associated with rectal cancer diagnosis and age, while treatment discontinuation was associated with age, location of the resident, and cancer stage.

## **Biography**

Ting-Yu Chiang has completed his BS from Yuanpei University of Medical technology in Taiwan. She is the case manager of colorectal cancer.

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