

Illness trajectories contributing to Malaysia's palliative care needs: An 11-year retrospective study

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ABSTRACT

Introduction: Palliative care should be accessible to all patients. This study aims to estimate future palliative care needs in Malaysia according to four illness trajectories associated with life-limiting chronic conditions; cancer, organ failure, frailty, and infectious disease. **Methods:** Secondary data analysis was conducted using national mortality data spanning from 2004 to 2014. Palliative care needs were estimated using the minimum estimation method developed by Murtagh et al. and stratified according to illness trajectories. **Results:** The frailty trajectory contributed the highest proportion of cases relative to total deaths (32–34%), followed by organ failure (24–27%), cancer (9–11%), and infectious disease trajectories (approximately 1%). Similarly, the frailty trajectory accounted for the highest proportion of annual total palliative care needs, averaging 47%. The organ failure trajectory contributed to 38% of total palliative care needs on average annually. Cancer and infectious disease trajectories contributed 14% and 1% of annual total palliative care needs, respectively. Sensitivity analysis using only medically certified deaths altered the average proportion of annual total palliative care needs contributed by illness trajectories, with organ failure contributing the highest proportion (75%), followed by cancer (22%), frailty (2%), and infectious disease (1%). The frailty trajectory proportion drastically fell mainly because vague causes of death (e.g. old age) among non-medically certified deaths inflated frailty trajectory cases. **Conclusion:** Approximately 78% of Malaysia's palliative care needs stem from non-malignant diagnoses. However, palliative care referrals are skewed towards cancer patients, highlighting inequity in access. Palliative care should be integrated with other therapeutic areas to achieve equitable access across all trajectories.