



Palliative therapies in hepatocellular carcinoma, palliative care in geriatric clinics, and the introduction of narrative medicine

Charles B. Simone II

New York Proton Center, New York, NY, USA

Correspondence to: Charles B. Simone II, MD. New York Proton Center, 225 East 126th Street, New York, NY 10035, USA.

Email: csimone@nyproton.com.

Submitted Sep 25, 2024. Accepted for publication Sep 25, 2024. Published online Sep 26, 2024.

doi: 10.21037/apm-24-141

View this article at: <https://dx.doi.org/10.21037/apm-24-141>

The July 2024 issue of *Annals of Palliative Medicine* is a truly unique issue that includes articles from multiple different special series. Together, manuscripts from these special series and general manuscripts together comprise 3 Original Articles, 27 Review Articles, 5 Mini-Reviews, 3 Editorials, and 1 Case Report in this single journal issue. This Message From the Editor-in-Chief focuses on those special series, setting the stage for readers to enjoy these impactful collections of articles on several different timely topics in palliative medicine.

First, Dr. Sukeshi Patel Arora and Dr. Sherri Rauenzahn Cervantez served as Guest Editors of a special series on the comprehensive care for patients with hepatocellular carcinoma (1). Hepatocellular remains one of the most common and most deadly malignancies. Incidence rates of liver cancers continue to increase, and although the median survival has improved over the past decade, liver cancers remain the third leading cause of death from cancer worldwide, with only a small minority of patients alive 5 years after their diagnosis (2). Hepatocellular carcinoma represents the majority of primary liver cancers, and there is renewed hope for improved outcomes in this patient population in the future with increased utilization of vaccinations for hepatitis B and improvements in treatment for hepatitis C, both of which are prominent etiologies for hepatocellular carcinoma (2).

Currently, however, most patients with liver cancers continue to be diagnosed with advanced disease that is not conducive to curative-intent management (3). As a result, multidisciplinary and comprehensive care for patients with hepatocellular carcinoma are critical. The 2022 San

Antonio Liver Cancer Symposium brought increased awareness to the palliative therapies employed for patients with hepatocellular carcinoma, and this special series in *Annals of Palliative Medicine* highlights those therapies. Articles by leaders in the fields of palliative care and liver malignancies focus on the management of cirrhosis and of hepatitis, the use of transplant, the treatment of localized and of multifocal disease, the role of radiation therapy, the use of immunotherapy and other novel therapeutics, rehabilitation, and multidisciplinary care for patients with hepatocellular carcinoma.

Next, Dr. Pragnesh Patel, Dr. Lara Skarf, and Dr. Susan Nathan served as Guest Editors of a special series on outpatient palliative care in geriatric clinics (4). This is an increasingly critical segment of the population to focus on for palliative medicine given that the world population is aging, and that more older adults are living with multiple chronic diseases. These Guest Editors detail that there have been recent improvements in the quality of care provided to older adults, but they discuss several challenges that persist in providing optimal care, including several unique challenges in an elderly population.

This special series provides readers with an overview of palliative care delivery relevant to specific conditions faced by the geriatric population—from advanced lung disease to advanced kidney disease to advanced cardiac disease to multimorbidity and frailty to human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) to cancer to dementia. Symptom management in these elderly patients is detailed, and several of the articles within the special series underscore a need for early

integration of palliative care in the disease trajectory using a multidisciplinary team approach. The importance of early palliative care has been well detailed across a multitude of diseases and has been prominently featured in articles in this journal, including some even from a decade ago (5).

Third, Dr. Anna Kitta and Dr. Eva Katharina Masel served as Guest Editors of a special series on narrative medicine in palliative care (6). Narrative medicine—as inspired by aspects of the humanities like literature, philosophy and art—is part of the medical humanities and focuses on the importance of narratives and stories in medicine. Medicine practiced with narrative competence is thought to be an optimal model for humane and effective medical practice. Narrative medicine can serve to bridge divides separating physicians from patients and their colleagues, providing for unique perspectives and opportunities for respectful, empathic, and nourishing medical care. (7,8). Narrative medicine is a relatively new concept—now just over 2 decades since its founding—and one that has, to date, been underreported in this journal, but it can be of critical importance in the journey that patients with chronic diseases face.

This special series details the intersection between storytelling and healthcare, describing how narratives shape the experiences of patients, their providers, and their clinicians in palliative care. The series covers such timely topics as medical comics in medical education and palliative care, the charm and challenges of providing palliative care in the intimate setting of a patient's home, the importance of narrative therapy and its role in healing, the role of storytelling in palliative care, and the realities and social responsibilities of caring for terminally ill patients in prison.

In addition to the collections of articles from the three aforementioned special series, with additional articles that are parts of special series on the use of radiation therapy for oncologic emergencies and on advances in radiofrequency ablation, the July 2024 issue of *Annals of Palliative Medicine* is truly a unique and impactful issue with appeal to a wide spectrum of practitioners and investigators in the plethora of disciplines providing palliative care (9).

Acknowledgments

Funding: None.

Footnote

Provenance and Peer Review: This article was commissioned

by the editorial office, *Annals of Palliative Medicine*. The article did not undergo external peer review.

Conflicts of Interest: The author has completed the ICMJE uniform disclosure form (available at <https://apm.amegroups.com/article/view/10.21037/apm-24-141/coif>). The author serves as the co-Editor-in-Chief of *Annals of Palliative Medicine* from April 2014 to April 2027. The author has no other conflicts of interest to declare.

Ethical Statement: The author is accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

Open Access Statement: This is an Open Access article distributed in accordance with the Creative Commons Attribution-NonCommercial-NoDerivs 4.0 International License (CC BY-NC-ND 4.0), which permits the non-commercial replication and distribution of the article with the strict proviso that no changes or edits are made and the original work is properly cited (including links to both the formal publication through the relevant DOI and the license). See: <https://creativecommons.org/licenses/by-nc-nd/4.0/>.

References

1. Arora SP, Cervantez SR. Comprehensive care for patients with hepatocellular carcinoma: insights from the 2022 San Antonio Liver Cancer Symposium. *Ann Palliat Med* 2024;13:747-8.
2. Bray F, Laversanne M, Sung H, et al. Global cancer statistics 2022: GLOBOCAN estimates of incidence and mortality worldwide for 36 cancers in 185 countries. *CA Cancer J Clin* 2024;74:229-63.
3. Singal AG, Llovet JM, Yarrow M, et al. AASLD Practice Guidance on prevention, diagnosis, and treatment of hepatocellular carcinoma. *Hepatology* 2023;78:1922-65.
4. Patel P, Skarf L, Nathan S. Palliative care of older adults. *Ann Palliat Med* 2024;13:749-50.
5. Simone CB 2nd. Early palliative care and integration of palliative care models in modern oncology practices. *Ann Palliat Med* 2015;4:84-6.
6. Kitta A, Masel EK. Unveiling narrative medicine in palliative care. *Ann Palliat Med* 2024;13:751-3.
7. Charon R. The patient-physician relationship. *Narrative medicine: a model for empathy, reflection, profession, and*

- trust. JAMA 2001;286:1897-902.
8. DasGupta S. Narrative humility. Lancet 2008;371:980-1.
 9. Zhang K, Shang B, Kellehear A, et al. Scope of Annals of

Palliative Medicine based on a review of the disciplinary development and evolving definition of palliative medicine. Ann Palliat Med 2023;12:1125-31.

Cite this article as: Simone CB 2nd. Palliative therapies in hepatocellular carcinoma, palliative care in geriatric clinics, and the introduction of narrative medicine. Ann Palliat Med 2024;13(5):1309-1311. doi: 10.21037/apm-24-141