

# Development and Application of an Integrated Palliative Care Programme for Elderly Patients with Advanced Lung Cancer and Comorbidities

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## Abstract

**Objective:** To develop an integrated palliative care programme for elderly patients with comorbidities and lung cancer, and to evaluate its effectiveness. **Methods:** Guided by the theory of supportive care, an integrated palliative care programme was developed through literature review and expert consultation. Using convenience sampling, elderly patients with advanced lung cancer and comorbidities admitted to the palliative care ward of a tertiary general hospital in Zhengzhou between January and February 2026 were selected as study subjects. The intervention group and control group each comprised 42 patients. The intervention group received an integrated palliative care intervention in addition to standard care, whilst the control group received standard care alone. Differences in scores for palliative care needs, quality of life, symptom burden, psychological distress, social support and sense of life's meaning were compared between the two groups before the intervention, two weeks after the intervention, and one month after the intervention. **Results:** A total of 11 experts completed two rounds of expert consultation, yielding an inter-rater reliability coefficient of 0.914. The response rates for valid questionnaires were 95.14% and 98.32%, respectively, with Kendall's coefficient of concordance at 0.098 and 0.260 ( $P < 0.05$ ). The constructed integrated care program for palliative care encompasses four intervention themes: symptom management, comfort care, psychological and spiritual care, social and informational support, with a total of 38 specific intervention items. During the programme's implementation, four participants dropped out of the intervention group and three from the control group. Following the intervention, the intervention group's scores for quality of life, social support and sense of life's meaning were all significantly higher than those of the control group, with all differences being statistically significant ( $P < 0.05$ ). Conversely, the intervention group's scores for palliative care needs, symptom burden and psychological distress were all significantly lower than those of the control group, with all differences being statistically significant ( $P < 0.05$ ). **Conclusion:** The implementation of an integrated palliative care programme can meet the palliative care needs of elderly patients with advanced lung cancer and comorbidities, improve their quality of life, enhance their levels of social support and sense of life's meaning, and effectively reduce their symptom burden and psychological distress. This programme is scientifically sound, highly targeted and feasible, and can serve as a reference for healthcare professionals in the practice of palliative care.

## Keywords

Advanced Lung Cancer, Comorbidities, Palliative Care Needs, Integrated Care