Reviewer’s report

**Title:** Timing of palliative care referral and aggressive cancer care toward the end-of-life in pancreatic cancer. A retrospective, single-centre observational study

**Version:** 0 **Date:** 03 Oct 2018

**Reviewer:** Reviewer 2

**Reviewer's report:**

PEER REVIEWER COMMENTS: To view the full report from the academic peer reviewer, please see the attached file.

REVIEWER COMMENTS FROM REPORT: This is a really important study and a relatively neglected area in palliative care;

Important to comment that "Pancreatic cancer is noted for its late presentation at diagnosis, limited prognosis and significant physical and psychosocial symptom burden."

Very important point; "Pancreatic cancer being the fourth and fifth leading cause of cancer death in the United States of America [7] and Australia [8] respectively, few studies have examined the impact of palliative care on the quality of end-of-life (EOL) care received in this patient cohort" and that "the median overall survival of metastatic pancreatic cancer is 8-11 months"

A good sample size; "We identified 457 patients with a diagnosis of pancreatic cancer over the study period. Of these, 278 met the eligibility criteria of being registered with the health service with a diagnosis of pancreatic cancer,"

Result - One hundred and one (36.3%) patients presented to the ED within the last 30 days of life

Very important finding - Only a third of our patient cohort (32.7%) received an early PCR - palliative care referral (> 3 months before death).

The comment that "Studies have also demonstrated that longer referral-to-death interval increases likelihood of dying at home or in an inpatient hospice" is important
REQUESTED REVISIONS:

Is "aggressiveness" of end-of-life (EOL) care, the correct word to use? Does not fit with palliation. The two words contradict each other. Better words might be 'efficient implementation' etc. This differs from "aggressive cancer care" a phrase used in the Method section.

Aggressive in this context is defined, but I wonder is it the correct phrase given the context of palliation and peaceful death

It is particularly confusing when reading the conclusion as follows; "Our findings reaffirm the benefits of early referral to palliative care, especially for those with aggressive illnesses and limited prognoses. We however question the ongoing benchmarks for aggressive care at the end of life, based on our findings that patients with significant symptoms and whose caregivers lack support or resilience appropriately require acute hospital service utilization or care in a supported environment."

This needs clarification as I am assuming that the paper is concluding that early palliative care referral is needed and avoiding aggressive EOL care such as chemotherapy. From my reading the word 'aggressive' has been used in different contexts

This is a very important paper in relation to pancreatic cancer which has such a high mortality as described. The paper would be strengthened if its generalisability globally could be given as well as in Australia and mention made of any studies in other countries.

ADDITIONAL REQUESTS/SUGGESTIONS:

As detailed above

Are the methods appropriate and well described?
If not, please specify what is required in your comments to the authors.

Yes

Does the work include the necessary controls?
If not, please specify which controls are required in your comments to the authors.

Yes

Are the conclusions drawn adequately supported by the data shown?
If not, please explain in your comments to the authors.

No
Are you able to assess any statistics in the manuscript or would you recommend an additional statistical review?
If an additional statistical review is recommended, please specify what aspects require further assessment in your comments to the editors.

Not relevant to this manuscript

Quality of written English
Please indicate the quality of language in the manuscript:

Acceptable

Declaration of competing interests
Please complete a declaration of competing interests, considering the following questions:

1. Have you in the past five years received reimbursements, fees, funding, or salary from an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

2. Do you hold any stocks or shares in an organisation that may in any way gain or lose financially from the publication of this manuscript, either now or in the future?

3. Do you hold or are you currently applying for any patents relating to the content of the manuscript?

4. Have you received reimbursements, fees, funding, or salary from an organization that holds or has applied for patents relating to the content of the manuscript?

5. Do you have any other financial competing interests?

6. Do you have any non-financial competing interests in relation to this paper?

If you can answer no to all of the above, write 'I declare that I have no competing interests' below. If your reply is yes to any, please give details below.

This reviewer has been recruited by a partner organization, Research Square. Reviewers with declared or apparent competing interests are not utilized for these reviews. This reviewer has agreed to publication of their comments online under a Creative Commons Attribution License attributed to Research Square and was paid a small honorarium for completing the review within a specified timeframe. Honoraria for reviews such as this are paid regardless of the reviewer recommendation.

I agree to the open peer review policy of the journal. I understand that my name will be included on my report to the authors and, if the manuscript is accepted for publication, my named report including any attachments I upload will be posted on the website along with the authors' responses. I agree for my report to be made available under an Open Access Creative Commons
CC-BY license (http://creativecommons.org/licenses/by/4.0/). I understand that any comments which I do not wish to be included in my named report can be included as confidential comments to the editors, which will not be published.

I agree to the open peer review policy of the journal.