The clinical study of palliative care lung cancer patients assessment and a pharmacovigilence awareness implementing for the cancer care home and hospitalised patients by using poly herbal natural dietary supplements

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ABSTRACT
Pharmacovigilance and Palliative care research and treatment is one of the most essential programme for the cancer patients because the drugs what they are consuming is producing adverse effects worst than the diseases. Our object is to study the different types of cancer patients-palliative care patients and the drugs they are consuming both the pain killers and other poly pharmacy. The main aim of the study to provide – activities relating to the detection, assessment, understanding and prevention of adverse effects or any other drug-related problem and creating the awareness programme about the pharmacovigilence activities.

Keywords. Pharmacovigilance, Palliative care, cancer patients chemotherapy; quality of life, survival, Adverse effect.

BACK GROUND
We believe in India where all citizen have right to access medical facility, where the medicines are affordable for the entire population. It is the bound duty of all the health care professional who can abel to assess and assist to the patients, public, specially for the palliative care cancer patients and their relatives, attends and should cultivate the awareness programme and insisting them to report their adverse reaction of medication to the nearest centre of pharmacovigilence programme of India. With help of health care professional, we can abel to minimize the relief of risk due to adverse event with medicine can be prevented. This should be a universal relief of safety for all the human population all over the world irrespect of caste, creed, religion and color should get the maximum benefit of safety use of medicines. We have started a journey of pharmacovigilence not only for the palliative care cancer patients but also for all other patients who consuming poly pharmacy, and public who consumes medicines from OTC Drugs. Prescribing medicines to relieve suffering and distress is a cornerstone of palliative care. However, there is limited evidence about the efficacy and safety of many drugs in palliative care. Currently most of
this evidence comes from patients with cancer rather than those with other terminal chronic diseases. Roving Palliative care requires the balancing of many consideration including a judicious appraisal of the benefits and harms of both pharmacological and non-pharmacological treatments. Pharmacovigilance, the process of monitoring, evaluating and improving the safety of medicines is essential if palliative care is to maximize the benefits from medicine and minimize the harms. Pharmacovigilance (PV) is defined as the science and activities relating to the detection, assessment, understanding and prevention of adverse effects or any other drug-related problem. Pharmacovigilance promotes the risk/benefit profile of medicines.

**WHO DEFINITION OF PALLIATIVE CARE**

Palliative care is an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems physical, psychosocial and spiritual.

**MATERIALS AND METHODS**

Descriptive study and discussion was initially carried out at kidwai memorial institute of oncology, under the guidance of Dr. Linga Gowda, Director, KMIO, Bangalore, India. Around 462 patients with different cancer type along with their relatives, attended this programme was studied both male and female. Different types of cancer patients were observed and consumption of medication was taken in to consideration of our research study (Adult both sex-18-65 years). Consumption of medication was recorded by analysis of benefit and risk factor and Suggestion of suitable medication or any alternative therapy in order to minimize the side effect around 10 lung cancer patients was selected and discussed here.

**INCLUSION CRITERIA**

1. Patient observed Adverse Drug Reactions of either sex (18-65) years.
2. Palliative care patients and their relatives give their concern for the study.

**EXCLUSION CRITERIA**

1. Patients less than 18 years and more than 65 years of age.
2. Pregnant woman.
3. Pediatric and geriatric patients.

**STUDY SITE**

St. Thomas Hospital, Victory Health Trust, and Prem nikan Cancer Care Home - Southern Region of India.

1. Implementation programme of pharmacovigilence - online
2. Fact about the cancer
3. Information about the side effect of cancer drugs
4. Alternative treatments,
5. Chemoprevention of cancer
6. Simple way to treat the cancer away
7. Interview with the patients.

The different cancer type was studied, benefit v/s risk factor of the individual drug or combination of drug therapy- the management of medication for the safety of individual patients in order to prolong the safety and span of life. Initial implementation programme about the pharmacovigilence out line was given to the patients. And their relatives. By means of 1. Awareness programme, 2. Modules, 3. Drug safety information printed under the local languages and English, 4. Continuous medical educational programme those who are educated in the villages. Information also conveyed to their local languages.

**STUDY ANALYSIS**

The data will be analyzed by spontaneous using suitable statistical methods in consultation with bio
scientist. Study under the approval of institutional review board and informed concern of the patient. Around 10 lung cancer patients profile was shared here. Patients names not disclosed.

General symptoms observed in the lung cancer. Signs and symptoms of lung cancer observed as fellows with the different patients:

- New cough that doesn’t go away
- Changes in a chronic cough or “smoker’s cough”
- Coughing up blood, even a small amount
- Shortness of breath
- Chest pain
- Wheezing
- Hoarseness
- Losing weight without trying
- Bone pain
- Headache

THE RISK FACTORS FOR LUNG CANCER INCLUDE

- Smoking (especially cigarettes, pipes, cigars)
- Secondhand smoke and air pollution
- Radon gas released from soil and building materials
- Family history
- Asbestos
- Metals like chromium, cadmium, arsenic
- Chronic lung diseases such as tuberculosis
- Radiation
- Diesel exhaust
- Paint

RX. PATIENT’S PROFILE

PATIENT NO: 1
Name of Patient: Mr xxxxx
Age: 38 [male]
Diagnosis: Lung Cancer.
Drug consumed: Injection- 5-Flouro Uracil [once in 21 days]
Two times radiation given- once in two month

Adverse drug reactions
1. Vomiting sensation - During radiation period
2. Loose motion. - During radiation period
3. Hiccup, GIT disturbances, nausea
4. Headache
5. Fever
6. Alopecia

7. Tiredness
8. Loss of appetite
9. Lack of sleep
10. Sometime skin irritation
11. Sometime getting constipation - due morphine consumption

RECTIFICATION AND ADVICE TO THE PATIENTS

1. Black grape fruit juice can be given - two times morning and evening - To rectify
2. Tiredness.
3. Pappy fruit is given to patients - when suffering constipation - Having good relief.
4. Alternative therapy given to relive pain by both Acupressure and Acupuncture.
5. We advice for patients to do yoga and prayers according to their religion - they claims
6. Really they feel better after doing prayers.
7. Any slight modification of dosage form and treatment schedule also make the patients feel better this is purely consultation with their consultant doctors.
8. Reflexology provides gentle pressure to the feet or hands to restore a state of balance and relaxation
9. Complementary therapies may help a person ‘just feel better,’ help relieve stress and tension and may aid in relaxation. They may help to reduce pain, anxiety, nausea, and depression and may improve sleep.
10. Apart from this I also advice to take the patients by drinking vegetable soups, which contain carrot, beetroot, beans.
11. Advice to take the patients plenty of water contain with fennel boiled and cooled - as much they can consume.
12. Consumption of lime with tea, or lemon grass tea may improve the patient’s wellbeing and relive tiredness.

PATIENT NO: 2
Name of the patients: Mr. xxxxx
Age: 55 years [Male]
Diagnosis: Lung Cancer.
Drug consumed:
Inj.Paclitaxel/ twice a week for 3 months - Review after 3 months.
ADVERSE EFFECTS OBSERVED
1. Decreased libido,
2. Impotence,
3. Skin rashes,
4. Swelling of lips.

LESS SERIOUS SIDE EFFECTS MAY INCLUDE
1. Impotence, loss of interest in sex, or trouble having an orgasm,
2. Abnormal ejaculation,
3. Swelling in your hands or feet,
4. Swelling or tenderness in your breasts,
5. Dizziness, weakness,
6. Feeling like you might pass out,
7. Headache,
8. Runny nose,
9. Skin rash.

RECTIFICATION AND ADVICE TO THE PATIENTS
1. Mild anti histamine tablet – non sedative can be given, Levo-citricine.
2. Vegetable soup and increase the consumption of fruits may relief of weakness.
3. Advice to take the patients plenty of water contains with fennel boiled and cooled, as much they can consume.
4. Black grape fruit juice can be given.
- two times morning and evening. To rectify tiredness.
5. Consumption of lime with tea, or lemon grass tea may improve the patient’s wellbeing and relive tiredness.

PATIENT NO: 3
Name of Patient: Mr. xxxxx
Age: 35 [male]
Diagnosis: lung Cancer
Drug Consumed
Injection: Inj.rituximab - Once in 15 days.
Tablets: Morphine, 10mg - at night time.
Adverse drug reactions
1. Change in frequency of bowel movements
2. Constipation
3. Blood in stools
4. Rectal bleeding,
5. Abdominal pain (bloating, gas or cramps)
6. Indigestion, vomiting sensation,
7. Insomnia,
8. Changes in consistency of stool (it may be loose or watery stools)
9. Hair fall - mild,
10. Hiccups,
11. Lack of appetite.

ADVERSE DRUG REACTION
1. Difficulty in passing urine,
2. Dermatitis,
3. Stomach pain,
4 Irritation in vagina while passing urine.
5 Constipation and block stool.
7 Hiccups
8. When she want to consume water-vomiting sensation.

PATIENTS NO: 4
Name of Patients: Mr.xxxx.
Age: 40 [male]
Diagnosis: lung Cancer
Drug Consumed
Injection: Cisplatin - Slow i.v. infusion.ever 3-4 weeks.
[Or]
Paclitaxel is given once per every 7 days or 21 days.

ADVERSE DRUG REACTION
1. Difficulty in passing urine,
2. Dermatitis,
3. Stomach pain,
4 Irritation in vagina while passing urine.
5 Constipation and block stool.
7 Hiccups
8. When she want to consume water-vomiting sensation.
RECTIFICATION AND ADVICE TO THE PATIENTS
1. Direct to the patient to oncologist. This kind of cancer mostly treated by surgery or chemotherapy.
2. Natural supplement foods like green leaves and vegetables given in order to increase RBC Count.
3. Mild pain killer can be given and Metoclopramide can be given in order to stop the vomiting sensation and also ask the patients to smell the lime fruit, vomiting can be reduce for some extent.
4. Black grape fruit juice can be given two times morning and evening, to rectify tiredness.
5. Give mixed papaya and banana fruit to relieve constipation.
6. Zinger soda can be given in order to increase the appetite of the patients.
7. Any antihistamic cream can be applied on the skin to reduce irritation, with consultation with doctors.
9. Tablet: Mepanamic acid 500 mg to relieve pain.

PATIENT NO: 5
Name of Patient: Mr. xxxxxx
Age: 55 [Male]
Drug consumed.
Doxorubicin injection  
[Or]
Tamoxifen Injection.
This medication must be given slowly into a vein only.
Diagnosis: Lung Cancer.
Symptoms of lung cancer
- Coughing up blood, even a small amount
- Shortness of breath
- Chest pain
- Wheezing
- Hoarseness
- Losing weight without trying
- Bone pain
- Headache.

ADVERSE DRUG REACTION
1. Diarrhea
2. Nausea and vomiting
3. Hair loss
4. Cough/hoarseness
5. Itching,
6. Joint pain
7. Pain in the lower back/side
8. Stomach/abdomen
9. Painful/difficult urination
10. Stopped/missed menstrual periods
11. Black/tarry stools
12. Bloody mucus or discharge in stools
13. Fast irregular heartbeat, shortness of breath

RECTIFICATION AND ADVICE TO THE PATIENTS
1. Adjust the dose in consultation with doctors.
2. Pomegranate fruits can be given to reduce the diarrhea.
3. Sugarcane juice along with ginger and lime can be added advantage.
4. Give some appetizer- amla with zinger and lime fruit juice.
5. Alternative therapy given to relieve pain by Acupressure.
6. Yoga and counseling and prayers make some differences.
7. After the treatments we advice the patients to fellow some of the Complementary and Alternative Medicine

PATIENT NO: 6
Name of Patient: Mr. xxxxxx
Age: 55 [Male]
Drug consumed.
Inj. curbolastin once in week.
Diagnosis: Lung Cancer.
- chest x-ray
- chest CT (computer tomography) scan,
- bronchoscopy (insertion of a tube into the bronchi), and sputum cytology (examination of cells in the phlegm).
Adverse drug reaction.
Leukopenia (26-97%)
Neutropenia (21-96%)
Nausea (81-93%)
Vomiting (81-93%)
Anemia (14-90%)
Magnesium loss (43-61%)
Thrombocytopenia (33-66%)
Alopecia (2-49%)
Asthenia (11-41%)
Elevated alkaline phosphatase (29-37%)
Central neurotoxicity (5-26%)
Elevated AST (19-20%)
Peripheral neuropathy (6-15%)
1-10%
Immune hypersensitivity reaction (2-9.2%)
Elevated bilirubin (5%)
Visual disturbance (rare)
Dehydration
Stomatitis

RECTIFICATION AND ADVICE TO THE PATIENTS
1. Adjust the dose in consultation with doctors.
2. Dried block seedless grapes. Given along with hot water to reduce the constipation.
3. Pomegranate fruits can be given to reduce the diarrhoea.
4. Sugarcane juice along with ginger and lime can be added advantage.
5. Give some appetizer- amla with zinger and lime- fruit juice.
6. Alternative therapy given to relieve pain by Acupressure.
7. Yoga and counseling and prayers make some differences.
8. After the treatments we advice the patients to follow the some of the
9. Complementary and Alternative Medicine

PATIENT NO: 7
Name of Patient:XXXX
Age: 48. [Male].
Diagnosis: Lung Cancer.

Drug consumed.
Inj.vinplastin. 2times weekly for 3 months.
Fellowed by RT.

ADVERSE DRUG REACTION
Risk of infection,
Bruising and bleeding
Hair loss
Skin changes
Sore mouth
Numb or tingling hands or feet
Headaches
Jaw pain

Eye problems
Anaemia (low number of red blood cells)
Loss of appetite
Tiredness
Constipation,
Diarrhoea

RECTIFICATION
1. Adjust the dose with consultation with oncologist.
2. Tulsi water+turmeric can be given in the morning in the empty stomach.
3. Alternative therapy given to relieve pain by both Acupressure and Acupuncture.
4. We advice for patients to do yoga and prayers according to their religion – they claims really they feel better after doing prayers.
5. Any slight modification of dosage form and treatment schedule also make the patients feel better this is purely consultation with their consultant doctors.
6. Reflexology provides gentle pressure to the feet or hands to restore a state of balance and relaxation
7. Complementary therapies may help a person ‘just feel better,’ help relieve stress

PATIENT NO: 8
Name of Patient:XXXX
Age: 38. [Male].
Diagnosis: Lung Cancer
Drug consumed.
Cap.etoposide.
Dose. 50-100 ng/m2 /day , i.v. for five days.
100-200 mg/day oral.

ADVERSE REACTION
Allergic reaction
Signs of a reaction can include:
a rash
; feeling itchy
, flushed or short of breath
; swelling of your face or lips;
feeling dizzy; having pain in your tummy, back or chest; or feeling unwell. The drug leaks outside the vein it can damage the tissue around the vein This is called extravasation.
RISK OF INFECTION
Etoposide can reduce the number of white blood cells in your blood. This will make you more likely to get an infection. When the number of white blood cells is low, it’s called neutropenia.

Bruising and bleeding
Anaemia (low number of red blood cells)
Loss of appetite
Tiredness
Constipation,
Diarrhoea
Hair loss
Skin changes
Sore mouth
Numb or tingling hands or feet
Headaches

ADVERSE EFFECT
Bruising and bleeding.
Anaemia (low number of red blood cells).
Loss of appetite.
Tiredness.
Constipation,
Diarrhoea,
Hair loss,
Skin changes,
Sore mouth,
Numb or tingling hands or feet,
Headaches,

PATIENT NO: 9
Name of Patient: XXXX
Age: 28 [Male] .
Diagnosis: Lung Cancer
Drug consumed.
Inj.beleomycin and Cap.etoposide.
Combination of drug therapy will make to reduce the tumor growth.

This medication may also be used to control the build-up of fluid around the lungs (pleural effusion) caused by tumors that have spread to the lungs.

RECTIFICATION
1.adjust the dose with consultation with oncologist.
2.Tulsi water+turmeric can be given in the morning in the empty stomach.
3.To relive the constipation give the dried grapes to the patients ask them to masticate nicely and consume them hot water.
4.Take pappya fruit along with fine apple fruit salad that will relive the constipation.
5. Alternative therapy given to relive pain by both Acupressure and Acupuncture.
6. We advice for patients to do yoga and prayers according to their religion –they claims really they feel better after doing prayers.
7. Any slight modification of dosage form and treatment schedule also make the patients feel better this is purely consultation with their consultant doctors.
8. Reflexology provides gentle pressure to the feet or hands to restore a state of balance and relaxation .
9. Complementary therapies may help a person ‘just feel better,’ help to relieve stress.

Any slight modification of dosage form and treatment schedule also make the patients feel better this is purely consultation with their consultant doctors.
8. Reflexology provides gentle pressure to the feet or hands to restore a state of balance and relaxation.

9. Complementary therapies may help a person ‘just feel better,’ help to relieve stress.

**PATIENT NO: 10**

Name of Patient: XXXX

- Age: 35 [Male]
- Diagnosis: Lung Cancer
- Drug consumed:
  - Doxorubicin 60-75 mg /m2/BSA-slow iv injection. Every 3 weeks.

Adverse effects:
- Cardiotoxicity as a unique adverse effect,
- Causing ECG changes and arrhythmias,
- Hypotension, CHF,
- Cardiomyopathy,-may be fatal.
- Bone marrow depression,
- Alopecia,
- Stomatitis,vomiting,
- Local Tissue damage.
- Urine may colored red...

**RECTIFICATION**

1. Consult with the cardiologist. And treat the patients for their side effects.
2. Dompridone tablets may be consumed to stop the vomiting sensation.
3. Mild anti histamine tablet – non sedative can be given, Levo-citricine.
4. Vegetable soup and increase the consumption of foods that may give relief of weakness.
5. Advice to take the patients plenty of water contains with fennel boiled and cooled, as much they can consume.
6. Black grape fruit juice can be given.-two times morning and evening. To rectify tiredness.
7. Consumption of lime with green tea, or lemon grass tea may improve the patient’s wellbeing and relieve tiredness.

Information about the side effect of some cancer drugs which is normally available in Indian hospital.

<table>
<thead>
<tr>
<th></th>
<th>Drug Name</th>
<th>Side Effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Inj.Filgrastim</td>
<td>Nausea; nosebleed; vomiting. irregular heartbeat</td>
</tr>
<tr>
<td>2</td>
<td>Inj.gemcitabine</td>
<td>Breathlessness, Loss of appetite</td>
</tr>
<tr>
<td>3</td>
<td>Inj.Methotrexate</td>
<td>mouth sores, diarrhoea,</td>
</tr>
<tr>
<td>4</td>
<td>Tab.capecidabio</td>
<td>CHF, pleural effusion</td>
</tr>
<tr>
<td>5</td>
<td>Tab.imatinib</td>
<td>GIT-Disturbances.</td>
</tr>
<tr>
<td>6</td>
<td>Tab.thalidomide</td>
<td>Limb deformity in the foetus.</td>
</tr>
<tr>
<td>7</td>
<td>Cap.etoposide</td>
<td>Alopecia, leukopenia,</td>
</tr>
<tr>
<td>8</td>
<td>Cap.hydroxy urea</td>
<td>GIT-Disturbances.</td>
</tr>
<tr>
<td>9</td>
<td>Cap.tenozolomide</td>
<td>Flu-like symptoms.</td>
</tr>
<tr>
<td>10</td>
<td>Inj.beleomyacin</td>
<td>Alopecia, skin reaction,</td>
</tr>
<tr>
<td>11</td>
<td>Inj.decarubicine</td>
<td>Heart attack,</td>
</tr>
<tr>
<td>12</td>
<td>Lasperginate.</td>
<td>Liver damage, clotting defects, pancreatitis</td>
</tr>
<tr>
<td>13</td>
<td>Inj.bortezonib</td>
<td>Loss of vision, loss of memory, paralysis.</td>
</tr>
<tr>
<td>14</td>
<td>Inj.curbo plastin</td>
<td>Hair loss, weakness, strokes nephrototoxicity</td>
</tr>
<tr>
<td>15</td>
<td>Inj.genocitarbin</td>
<td>Bleeding, anemia, anorexia,</td>
</tr>
<tr>
<td>16</td>
<td>Inj.methrexate</td>
<td>Bloody stool, mouth sore,</td>
</tr>
<tr>
<td>17</td>
<td>Inj.Oxali plastin</td>
<td>Diarrhea, acute allergic reaction.</td>
</tr>
<tr>
<td>18</td>
<td>Inj.Pacitaxel.</td>
<td>Nausea, chest pain, mayalgia,</td>
</tr>
<tr>
<td>19</td>
<td>Inj.teme tenecl.</td>
<td>Itching in hand and feet.</td>
</tr>
<tr>
<td>20</td>
<td>Inj.leucerion colcine</td>
<td>Bloody diarrae, muscular paralysis. Respiratory paralysis.</td>
</tr>
<tr>
<td>21</td>
<td>Inj.ritusimab.</td>
<td>Skin rash, chill fever, hypotension.</td>
</tr>
<tr>
<td>22</td>
<td>Inj.vinplastin.</td>
<td>Bone marrow depression</td>
</tr>
<tr>
<td>23</td>
<td>Inj.zoledronic acid.</td>
<td>urinating less than usual weight gain, feeling short of breath;</td>
</tr>
</tbody>
</table>
Here assessment of the lung cancer patients taken, as the sample of one patients. This may vary from patients to patients among the lung cancer itself.

**PALLIATIVE CARE PATIENT ASSESSMENT**

Patient name: XXXX

**Age**: 45

**Sex**: M

**DIAGNOSIS**

**LUNG CANCER**

Degree of assessment:

| Normal activity, no limitation | 0 |
| Some limitation in active work | 1 |
|Requires considerable assistance| 2 |
|Spend most of the day (>50%) in bed| 3 |

Q: How are you feeling today?

Q: What symptoms are you having now, what is bothering you today?

<table>
<thead>
<tr>
<th>SYMPTOM</th>
<th>MILD</th>
<th>MODERATE</th>
<th>SEVERE</th>
<th>NO. RESPONSE FROM, THE PATIENTS.</th>
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<tr>
<td>Agitation</td>
<td>+</td>
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<tr>
<td>Anorexia</td>
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<td>-</td>
<td>-</td>
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<tr>
<td>Anxiety</td>
<td>+</td>
<td>-</td>
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<tr>
<td>Alopecia</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>2</td>
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<tr>
<td>Bad dreams</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Confusion</td>
<td>-</td>
<td>+</td>
<td>-</td>
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<tr>
<td>Constipation</td>
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<td>2</td>
</tr>
<tr>
<td>Cough</td>
<td>-</td>
<td>-</td>
<td>+</td>
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<tr>
<td>Chills</td>
<td>-</td>
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</tr>
<tr>
<td>Depression</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Dry mouth</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>2</td>
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<tr>
<td>Diarrhoea</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Dizziness</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Drowsiness</td>
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<td>2</td>
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<tr>
<td>Dyspnea</td>
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<td>Edema</td>
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<tr>
<td>Fatigue</td>
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<tr>
<td>Fewer</td>
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<tr>
<td>Hallucinations</td>
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<td>+</td>
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<td>Hearing problems</td>
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</tr>
<tr>
<td>Heart burn</td>
<td>-</td>
<td>+</td>
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<td>2</td>
</tr>
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<td>Hiccups</td>
<td>-</td>
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<td>2</td>
</tr>
<tr>
<td>Incontinence/urine</td>
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<td>+</td>
<td>-</td>
<td>2</td>
</tr>
<tr>
<td>Incontinence/stool</td>
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<td>2</td>
</tr>
<tr>
<td>Itching</td>
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<td>Indigestion</td>
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<tr>
<td>Memory problems</td>
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<tr>
<td>Nausea</td>
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<tr>
<td>Numbness/tingling in hands and feet</td>
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<tr>
<td>Pain</td>
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<tr>
<td>Skin changes</td>
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<tr>
<td>Sleep problems</td>
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<tr>
<td>Sore mouth</td>
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<tr>
<td>Sweats</td>
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<tr>
<td>Taste change</td>
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<tr>
<td>Tremors</td>
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<tr>
<td>Vision problems</td>
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<tr>
<td>Vomiting</td>
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<td>Weight loss</td>
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<td>Wheezing</td>
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**INTERESTING FACTS ABOUT CANCER**

1. Every person has cancer cells in their body. These cancer cells do not show up in the standard tests until they have multiplied to a few billion times.
2. When doctors tell cancer patients that there are no more cancer cells in their bodies after treatment, it just means the tests are unable to detect the cancer cells because they have not reached the detectable size.
3. Cancer cells occur in the body between 6 to more than 10 times in a person’s lifetime.
4. When the person’s immune system is strong the cancer cells will be destroyed and prevented from multiplying and forming tumours.
5. When a person has cancer it indicates the person has multiple nutritional deficiencies. These could be due to genetic, environmental, food and lifestyle factors.
6. To overcome the multiple nutritional deficiencies, changing diet and including supplements will strengthen the immune system.
7. Chemotherapy involves poisoning the rapidly-growing cancer cells and also destroys rapidly-growing healthy cells in the bone marrow, gastrointestinal tract etc, and can cause organ damage, to the liver, kidneys, heart, lungs etc.
8. Radiation while destroying cancer cells also burns, scars and damages healthy cells, tissues and organs.
9. Initial treatment with chemotherapy and radiation will often reduce tumor size. However prolonged use of chemotherapy and radiation does not result in more tumor destruction.

10. When the body has too much toxic burden from chemotherapy and Radiation the immune system is either compromised or destroyed, hence the person can succumb to various kinds of infections and complications.

11. Chemotherapy and radiation can cause cancer cells to mutate and become resistant and difficult to destroy. Surgery can also cause cancer cells to spread to other sites.

12. An effective way to battle cancer is to starve the cancer cells by not feeding it with the foods it needs to multiply.

Some of the vegetables can prevent the cancer – chemo prevention. We also advice the patients to consume the vegetable as much as possible.

STUDY ANALYSIS

The data will be analyzed by spontaneous using suitable statistical methods in consultation with bio scientist. Study under the approval of institutional review board and informed consent of the patient.

Palliative care
1. This mainly provides relief from pain.
2. This may intended to postpone the death.
3. This system helps the patients to live as actively until death.
4. This will enhance the quality of life.

RESULTS

Lung cancer is the leading cause of cancer deaths in India because of smoking habits. The World Cancer Report, a 351-page global report issued by International Agency for Research on Cancer (IARC)
tells us that cancer rates are set to increase at an alarming rate globally (Stewart and Kleiues 2003). Cancer rates could increase by 50% to 15 million new cases in the year 2020. This will be mainly due to steadily aging populations in both developed and developing countries and also to current trends in smoking prevalence and the growing adoption of unhealthy lifestyles. The report also reveals that cancer has emerged as a major public health problem in developing countries, matching its effect in industrialized nations. M en s are having more prone to have Lung cancer claims more lives each year than do colon, prostate, ovarian and breast cancers. Here different types of cancer patients was studied among them lung cancer patients are more in men, than in women . Personnel home visit at the frequency of 3 times a week makes the patients and their attenders, relatives happy we also . advice the patients to quit smoking . The feed back from the patients to increase the level of comfort in all possible ways . Alternative drug therapy, and poly herbal formulation and chemoprevention makes them to lead the healthy life.

**DISCUSSION**

Pharmacovigilence for the palliative care patients are the most essential programme in order to reduce the Adverse drug reaction observed from different kind of cancer patients, specially for lung cancer patients. this can be minimized by quitting the smoking, by giving the alternative therapy and natural food value-herbal therapy When the chemotherapy drugs produce lots of side effects sometimes the dosage schedule can be modified with consultation with oncologist. This will provide the sound recommendation about the safety medication.

**CONCLUSION**

The awareness study of Pharmacovigilance may improve the life style of palliative care patients. The role of chemotherapy and pain management and symptoms management, chemoprevention with different mechanism of action can be further studied, the awareness of drug was implemented and information conveyed in the local languages. We believe this is an important fact integral part of palliative care education. Delivery of efficient palliative care for advanced cancer patients is driven by continuous, systematic, multidimensional assessments ideally performed by an interdisciplinary team. Screening assessments include main symptoms, factors influencing symptom expression and main syndromes associated with symptoms. Skillful communication enables useful assessments. We urge other medical/pharmacy/nursing college to implement similar program.

**REFERENCE**


