### G.16.1.2 Quantitative evidence

#### Specialist palliative care team versus usual care

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality		
Palliative care plan developed									
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Not serious	99	RR 5.84 (1.37, 25.02)	Moderate		
Palliative care plan during hospitalisation									
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 5.31 (0.26, 107.77)	Low		
Palliative care plan on discharge									
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Not serious	96	RR 4.50 (1.03, 19.75)	Moderate		
Decision to forgo ente	ral feeds								
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 0.80 (0.19, 3.38)	Low		
Decision to forgo mec	hanical ventilation								
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 7.43 (0.39, 140.15)	Low		
Decision to forgo intravenous lines									
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 5.31 (0.64, 43.84)	Low		
Decision to forgo bloo	d draws								

© National Institute for Health and Care Excellence, 2017

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality	
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 9.55 (0.53, 172.81)	Low	
Decision to forgo antil	piotics							
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 7.43 (0.39, 140.15)	Low	
Death in hospital								
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 1.06 (0.53, 2.13)	Low	
Hospital admissions								
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	MD 0.04 (-0.74, 0.82)	Low	
New feeding tube								
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 1.06 (0.68, 1.65)	Low	
Total feeding tube use	e							
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 1.06 (0.81, 1.39)	Low	
Mechanical ventilation	ı							
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 0.53 (0.10, 2.77)	Low	
Tracheostomy								
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 0.35 (0.01, 8.84)	Low	
Cardiopulmonary resu	scitation							
1 (Ahronheim 2000)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	99	RR 0.15 (0.01, 2.86)	Low	
1. Allocation ass	signment unclear a	and participants not	blinded.					

2. Non-significant result.

# Use of decision aid on feeding options

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality	
Decisional conflict in surrogate decision-makers								
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	90	MD -0.30 (-0.61, 0.01)	Low	
Feeding discussion wi	Feeding discussion with physician, nurse practitioners or physician assistants							
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	90	RR 1.57 (0.93, 2.64)	Low	
Feeding discussion with other nursing home staff								

© National Institute for Health and Care Excellence, 2017

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	90	RR 1.12 (0.86, 1.45)	Low
Any modified diet							
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	90	RR 1.19 (0.31, 4.54)	Low
Specialised dysphagia diet							
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Not serious	90	RR 1.30 (1.09, 1.56)	Moderate
Specialised staff assis	stance						
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	90	RR 2.39 (0.81, 7.07)	Low
Specialised utensils							
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	90	RR 0.24 (0.03, 2.06)	Low
Head/body positioning	]						
1 (Hanson 2011)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	90	RR 2.87 (0.12, 68.60)	Low
1. Participants a	nd assessors not	blinded.					
<ol><li>Non-significar</li></ol>	nt result.						

## Goals of Care intervention versus usual care

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality		
Quality of communication (overall) – higher numbers favour intervention									
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	299	MD 0.20 (-0.29, 0.69)	Low		
Quality of communication (general) – higher numbers favour intervention									
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	299	MD 0.40 (-0.08, 0.88)	Low		
Quality of communication (end of life) – higher numbers favour intervention									
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Not serious	299	MD 0.80 (0.15, 1.45)	Moderate		
Family-care provider of	concordance on pri	mary care goal – hi	gher numbers favou	ur intervention					
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Not serious	299	RR 1.24 (1.11, 1.40)	Moderate		
Advanced care planni	Advanced care planning problem score >1 – lower numbers favour intervention								
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	299	RR 1.03 (0.88, 1.20)	Low		
Symptom management	Symptom management – higher numbers favour intervention								

© National Institute for Health and Care Excellence, 2017

Number of RCTs	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality	
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	299	MD -1.10 (-3.18, 0.98)	Low	
Satisfaction with care – higher numbers favour intervention								
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	299	MD -0.60 (-1.87, 0.67)	Low	
Palliative care treatm	Palliative care treatment plan domain score – higher numbers favour intervention							
1 (Hanson 2017)	Serious <sup>1</sup>	N/A	Not serious	Not serious	299	MD 0.60 (0.13, 1.07)	Moderate	
1. Participants not blinded.								
2. Non-significant result.								

## Enteral tube feeding

Number of studies	Risk of bias	Inconsistency	Indirectness	Imprecision	Sample size	Effect size (95% CI)	Quality
Systematic review of e	enteral tube feeding	g studies					
Sampson (2009)	Serious <sup>1</sup>	N/A	Not serious	Serious <sup>2</sup>	1,813	No meaningful effects identified	Low

1. All included studies were observational studies at high risk of bias, but risk of bias upgraded from very serious to serious due to large sample size and consistent results

2. No meaningful differences identified between groups.