Quality of life in patients receiving medicines for prostate cancer: What do clinicians think is important?

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Introduction

Recent studies have shown that utilising Patient Reported Outcome Measures (PROMs) data can have a positive impact on clinician decision making and improve patient outcomes1,2. Many PROMs exist, but there is limited evidence on which may best assess the impact cancer medicines have on quality of life (QoL).

Aim

To identify a PROMs tool which best reflect the areas of QoL clinicians consider important to discuss with prostate cancer patients who are receiving medicines as part of their treatment.

Methods

- PROMs tools identified (n=30)
- Generated a framework of domains / domain elements
- Clinicians ranked what QoL domains are important to discuss
- Clinicians ranked what QoL domain elements are important to discuss
- Mapped important domain / domain elements back to PROMs tools (n=30) to pick best fit

Figure 1: Methodology

Results

- The literature review identified PROMs tools that were validity or reliability tested, or used in current clinical practice, comprising: health, cancer and prostate cancer questionnaires; supportive care needs tools; and chemotherapy toxicity assessment tools.
- PROMs tool content was categorised to generate a framework of 9 QoL domains and 70 domain elements, and was validated against models of QoL3, 4.
- eDelphi 1 sent to prostate cancer clinicians in West of Scotland (n=146) who ranked 9 QoL domains in terms of importance when discussing how treatment impacts QoL. Respondents (n=21) ranked 7 of the domains as important.
- N=21 clinicians ranked 43 of the 62 domain elements as important in eDelphi 2 (Figure 2).

Next Steps

eDelphi 3 will present clinicians with the 4 PROMs tools and ask them to comment on length, wording and format to identify the best tool for use in routine clinical practice.

Further steps involve establishing what domains / domain elements are important to patients, and identifying and piloting a PROMs tool which best reflects the needs of both clinicians and patients.

Conclusion

A more systematic approach to the collection and utilisation of PROMs around the impact cancer treatment has on QoL should facilitate more informed patient decision making around treatment choice.

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