A Prospective Analysis of the Association between Skeletal-related Events and Quality of Life in Patients with Advanced Lung Cancer (CSP-HOR13)

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ABSTRACT

Background

We have reported the incidence of bone metastases (BM) and skeletal-related events (SREs) in patients with advanced lung cancer as a prospective study at the previous meeting, but there are still only a few reports on the association between SREs and quality of life (QOL). The aim of this study was to prospectively investigate how the QOL of patients with advanced lung cancer is affected by SREs.

Methods

The eligibility criteria were newly-diagnosed patients with stage III B or IV lung cancer, aged over 20 years, who had given written informed consent. The patients were closely followed up for the lung cancer and the use of antineoplastic agents as well as the activity of daily living (ADL) scores by the Barthel Index. SREs are defined as pathologic fractures, radiation or surgery of bone lesions, spinal cord compression or hypercalcemia.

Eligibility criteria

- Small cell/non-squamous type
- Advanced lung cancer, as well as the incidence of bone metastases (BM) and SREs.

METHODS

- Methods
- Eligibility criteria
- Age ≥ 20 years
- Written informed consent
- SCLC: small cell lung cancer
- NSCLC: non-small cell lung cancer
- Definition of SREs
- Pathologic fractures
- Radiation or surgery of bone lesions
- Spinal cord compression
- Hypercalcemia

RESULTS

- QOL and ADL of the patients
- Changes in the QOL and ADL scores of patients with BM (BM) and SREs (SRE).

CONCLUSIONS

- The total QOL of patients with advanced lung cancer was not affected by SREs. However, the evaluation by FACT-G revealed a statistically significant decline in emotional functioning after SREs.

This study was funded by Health Outcomes Research (CSP-HOR) of the Public Health Research Foundation.