

# Age Influences HRQOL in Cancer Patients

Clinical decision making should balance patients' perspectives and clinical data

Cancer is often a fatal disease, but with recent advances being diagnosed with certain types of cancers means living with a chronic disease. As selected treatments allow us to class certain cancers as chronic diseases, it is imperative to understand how this disease affects a patient's Health Related Quality of Life (HRQOL) over the long term and how patients can adapt to living and surviving with cancer. Past literature has illustrated that the cancer burden is age-dependent and highly associated with a cancer patient's perception of his or her quality of life. Using the European Organisation for Research and Treatment of Cancer (EORTC) QLQ-C30, HRQOL can be classified into five functioning scales, nine



"This is the PROBE research team with the Advisory Board and the EORTC Quality of Life Staff at the bi-annual meeting held March 21 this year in Brussels at the EORTC Headquarters. All are co-authors and their fantastic help is a very great asset to the research presented in this article." - Chantal Quinten, Quality of Life dept. (EORTC)

symptom scales and one global health scale. In our study, we found that increasing age when comparing younger cancer patients (<70 years) to older cancer

patients (>70 years) had a negative influence on a patient's HRQOL after accounting for clinical factors that might influence their HRQOL burden.

In eight of the fifteen QLQ-C30 scales, significant HRQOL impairment was found between younger and older cancer patients, whereby young patients reported a higher functioning and a lower symptom burden than elderly patients. Except for financial difficulties, where younger patients were more concerned about the financial impact of their disease. In light of the work of Osoba et al 1998, we examined if these differences, defined

by 10 points on the EORTC QLQ-C30 scales (scored 0-100), were clinically meaningful. The differences reported were all less than 10 points, indicating no clinical meaningful imbalance between the two categories.

Patient reported outcomes are now fully accepted as important tools in patient care management and are becoming key indicators that can help alter clinical practice based on results from large scale clinical trials. For example, those published by Strupp et al 1998 and Bottomley et al 2009. Health care professionals are aware that they should not only have knowledge of the disease, but also a clear understanding of the short and long term impact on HRQOL, and understand this in relation to the age of the patient. Our extensive analysis indicates that, as provisional literature has suggested,

age should be considered when the quality of life status of a patient is examined given that age may provide important prognostic information for survival prognosis (Quinten et al 2009). Given that society is set to get older, our findings are of particular importance for the future, for understanding the way age and HRQOL are associated.

We believe that clinical decision making should include a balance of patients' perspectives as well as clinical data (e.g. genetic data, etc.) and our analysis might help health care professionals make a more rounded informed approach when treating patients, as our results strongly suggest that the elderly present rather different characteristics for some HRQOL scales which should be taken into consideration. Ideally patients' HRQOL data should be assessed with

more objective clinical patient characteristics than age alone, to provide a complete picture of the health related status of each individual patient.

As readers are aware, more and more clinical trials will include elderly patients, reducing the selection bias and increasing the accrual time and generalisation of the results. But such trials can be challenging, given some patients may need special treatments or measures (e.g. EORTC has developed a module specifically for elderly patients to assess their needs). However, our findings may provide some rationale as to whether older patients should be included in these trials. Often the elderly are excluded from clinical trials as health care professionals fear that they are too frail to participate in new treatments screening and health research in general due to their advanced

age (Talarico et al 2004). Our results indicate that cancer patients older than 70 years may be fit enough to undergo new cancer treatments, even though their psycho-social status and general well-being may be affected by their disease. ■

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# The Importance of Symptom Management

Health Related Quality of Life and Oncology Aftercare Discussed

According to practice research at the department of Medical Oncology of the Erasmus MC-Daniel, the Netherlands, patients treated with chemotherapy perceive chemotherapy related symptoms (CRS) frequently. On Monday, Martine Folsche MANP, nurse practitioner at the the Erasmus MC will talk about the "Management of chemotherapy-related symptoms by telephone aftercare by an oncology nurse" (Abstract No. 4151).



Martine Folsche

Please see below details on the session and return to our next issue for more...

*Proffered Papers Oncology nursing  
Telecare and lifestyle interventions  
Hall 7  
Date: 21-Sep-2009  
From: 11:00 To: 12:30*

Cancer is often a fatal disease, but with recent advances being diagnosed with certain types of cancers means living with a chronic disease. As selected treatments allow us to class certain cancers as chronic diseases, it is imperative to understand how this disease affects a patient's Health Related Quality of Life (HRQL) over the long



Chantal Quinten and her research team at the EORTC

term and how patients can adapt to living and surviving with cancer. Past literature has illustrated that the cancer burden is age-dependent and highly associated with a cancer patient's perception of his or her quality of life. On behalf of PROBE and the EORTC Clinical Groups Chantal Quinten will present "An evaluation of the association between age and health related quality of

life and symptoms in cancer patients – a pooled analysis of closed EORTC Randomized Controlled Trials" (Abstract No. 4165).....

*Proffered Papers Oncology nursing  
Symptoms  
Hall 9  
Date: 21-Sep-2009  
From: 16:15 To: 18:00*