

QUALITY OF LIFE IN PATIENTS TREATED WITH STEREOTACTIC ABLATIVE BODY RADIOTHERAPY (SABR) FOR LIVER METASTASES

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Abstract

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Purpose: SABR is a locally ablative therapy for liver metastases associated with favorable local control rate, but data on patient-reported outcome is limited. The purpose of this prospective study is to measure quality of life (QOL) score changes after SABR in patients with liver metastases.

Materials and Methods: Patients treated with SABR to 1-3 hepatic metastases completed the European Organisation for Research and Treatment of Cancer (EORTC) Quality of Life Questionnaire-Core 15 Palliative (QLQ-C15-PAL) and EORTC QLQ-liver metastases (QLQ-LM21) validated questionnaires. The QLQ-LM21 is designed for patients with colorectal cancer (CRC) liver metastases treated with liver surgery or palliative treatment. The QLQ-C15-PAL is a shorter version of the QLQ-C30 core questionnaire and it was chosen to decrease the burden of completing both the longer QLQ-C30 form and the QLQ-LM21. Questionnaires were completed before, during and at one week, six weeks, and three months post-SABR. A high score represents a high QOL for the global health status, a high level of functioning for the functional scales, or a high level of symptomatology for the symptom scales.

Results: Thirty metastatic patients (15 men, 15 women) with a primary CRC (n=12), non-CRC gastro-intestinal cancer (n=8), breast cancer (n=6), or lung cancer (n=4), were accrued. Median age was 65 years (range, 40-88 years). All had Child-Pugh score of A. Questionnaire compliance was 100% at baseline and during SABR, 97% (29/30) at one week, 80% (24/30) at six weeks, and 60% (18/30) at three months. Majority of the QOL items (QLQ-C15-PAL, 12/15 [80%] items; QLQ-LM21, 21/21 [100%] items) remained stable after liver SABR for all the time points, except for increasing fatigue (mean score change, 2.0/4 to 2.3/4; p=0.049) and decreased global health status (mean score change, 5.3/7 to 5.0/7; p=0.033) both at one week post-SABR.

Conclusions: QOL remained stable after SABR in liver metastases in the majority of the QOL items (80% on the QLQ-C15-PAL, 100% on the QLQ-LM21), except for fatigue and global health status at one week post-SABR. SABR provides not only local control but also maintains QOL.

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