



ASSESSMENT OF QUALITY OF LIFE OF LATIN-AMERICAN PATIENTS WITH THYROID CANCER WITH THE THYCA-QoL QUESTIONNAIRE



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Introduction

Many studies have demonstrated a decrease in QoL in thyroid cancer patients, comparable to other tumors with worse prognosis. Most of these QoL assessment have been done with generic instruments. THYCA-QoL was validated to Spanish language in 2018. We do not know the specific impact if thyroid carcinoma in of QoL in Latin-American patients.

Objectives

To evaluate QoL in patients with thyroid carcinoma with a generic instrument (EORTC QLQ-C30) and an adapted and validated instrument (THYCA-QoL) and to explore association of QoL scores with patients features.

Materials and methods

This is a descriptive cross-sectional study approved by the Ethics in Research Committee of the Fundacion Colombiana de Cancerologia- Clinica Vida. Adult patients with thyroid carcinoma and who underwent total or partial thyroidectomy were included and asked to complete the Spanish-validated versions of the Thyca-QoL and the EORTC QLQ-C30. Demographic data, comorbidity, ECOG functional scale scores, TNM stage (UICC 7th version), and data on the surgical procedure, adjuvant treatment with radioiodine, T4 supplementation, surgical complications and vital stage data were obtained from clinical charts. A descriptive analysis was done for each individual item of the Thyca-QoL. Comparisons of scales scores for categorical variables were also done.

Results

A total of 293 patients were recruited. The mean age was 47± 14.2 years (18-84 years) and 247 (84%) patients were female. Almost all patients (96.6%) have a papillary histology. The most frequent type of surgery was total thyroidectomy and 38% of patients underwent a neck dissection.

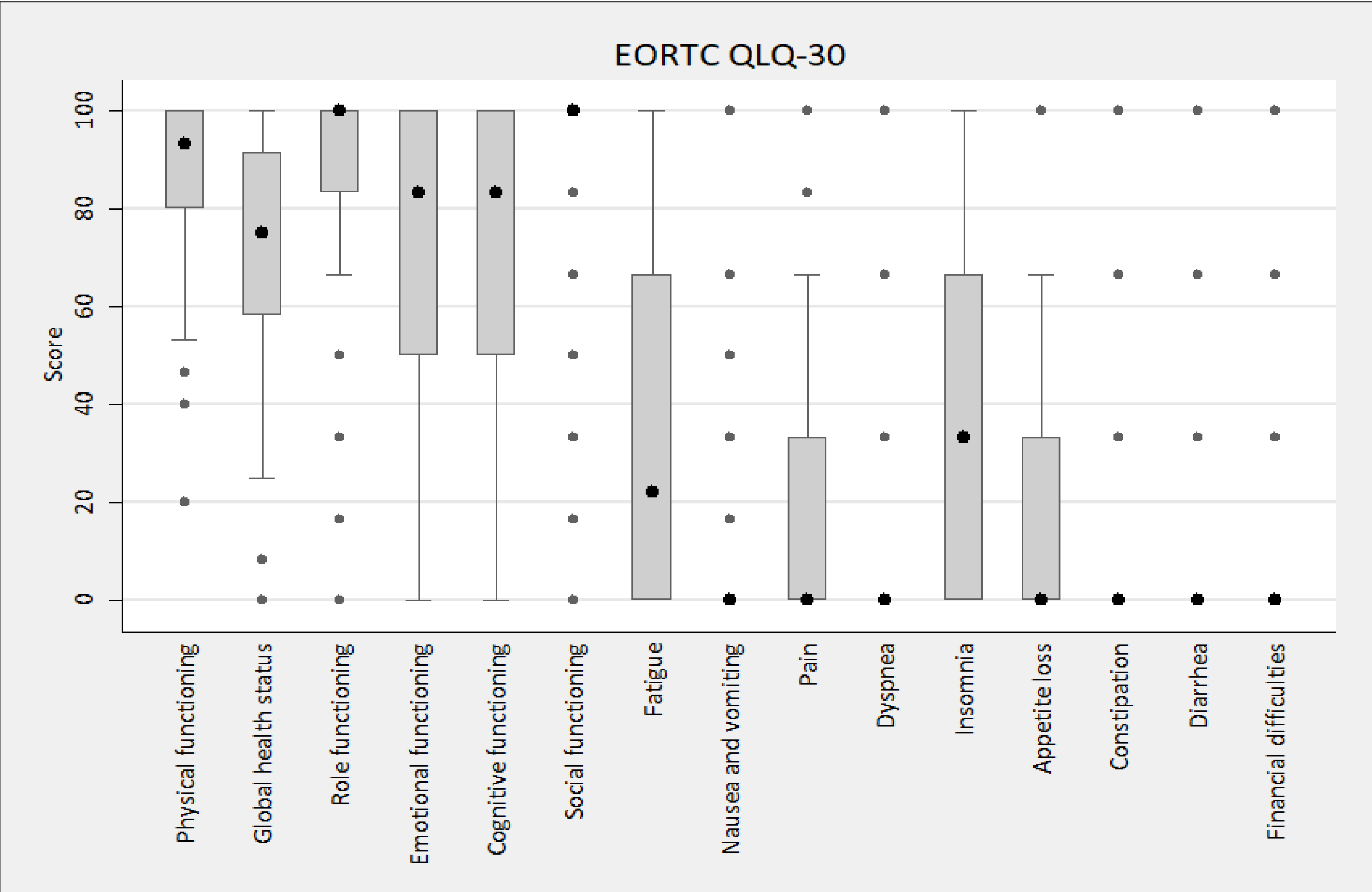


Figure 1. EORTC-QLQ-30 scores

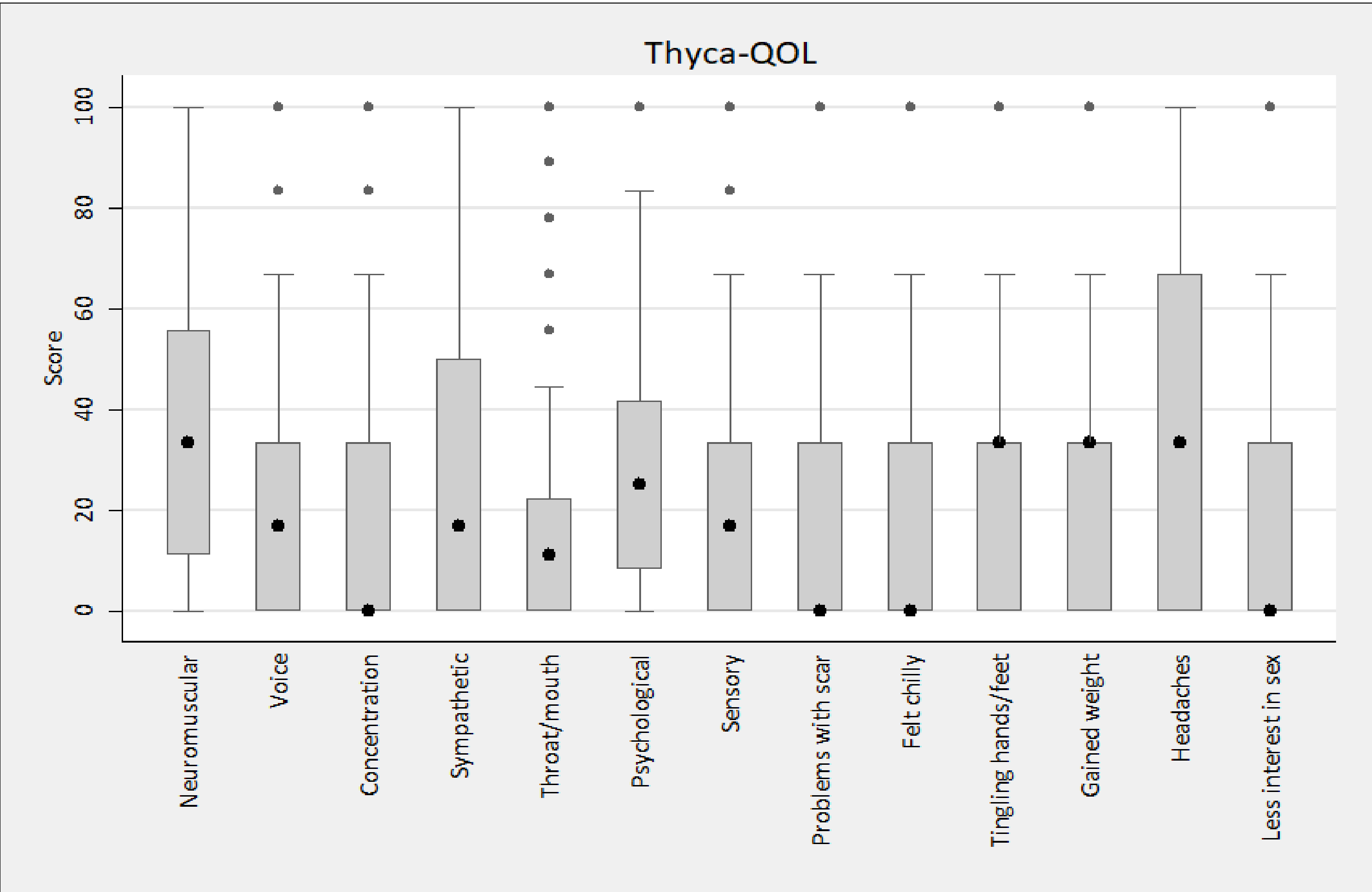


Figure 2. Thyca-QoL gscores

Almost 40% of patients needed RAI ablation. Mean time from diagnosis was 23.6+-24.1 months and 64% of patients have <24 months of follow up.

The global EORTC QLQ-C30 score was 73.2+-22.1. The domain with poorer values were emotional (69.6+-31.6) and cognitive (73.1+-28.4) and the symptoms with poorer values were insomnia (36.4+-38.9, median 33.3) and fatigue (35.4+-32.9, median 22.2).

The global Thyca-QoL score was 28.4+-17.8. The items with the less favorable results were abrupt tiredness (quitter a bit/very much, 50.9%), muscle/joint pain (40.3%) and headaches (33.4%).

There were statistical differences in most domains for sex (higher scores for female patients) and ECOG functional scale (higher scores for ECOG>1). Sympathetic domain score was higher in young people, women, early clinical stage and patients alive without disease. Neuromuscular domain score was higher in women, ECOG>1, surgery treatment and alive without disease. Voice domain score was higher for women, ECOG>1, advanced clinical stage and alive with disease.

Conclusion

In conclusion, the results of this study provides information about the QoL in Latin-American patients with thyroid cancer using a generic and a specific instrument. Patients with thyroid cancer have a good prognosis, but this study shows that they experience important problems related with QoL. QoL was influenced by demographic and clinical factors as age, sex functional status and clinical stage.