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INTRODUCTION:

- Superior survival outcomes → QOL has become integral in the contemporary management of oropharyngeal cancers (OPCs)
- Various treatment options pose a challenge to both physicians and patients

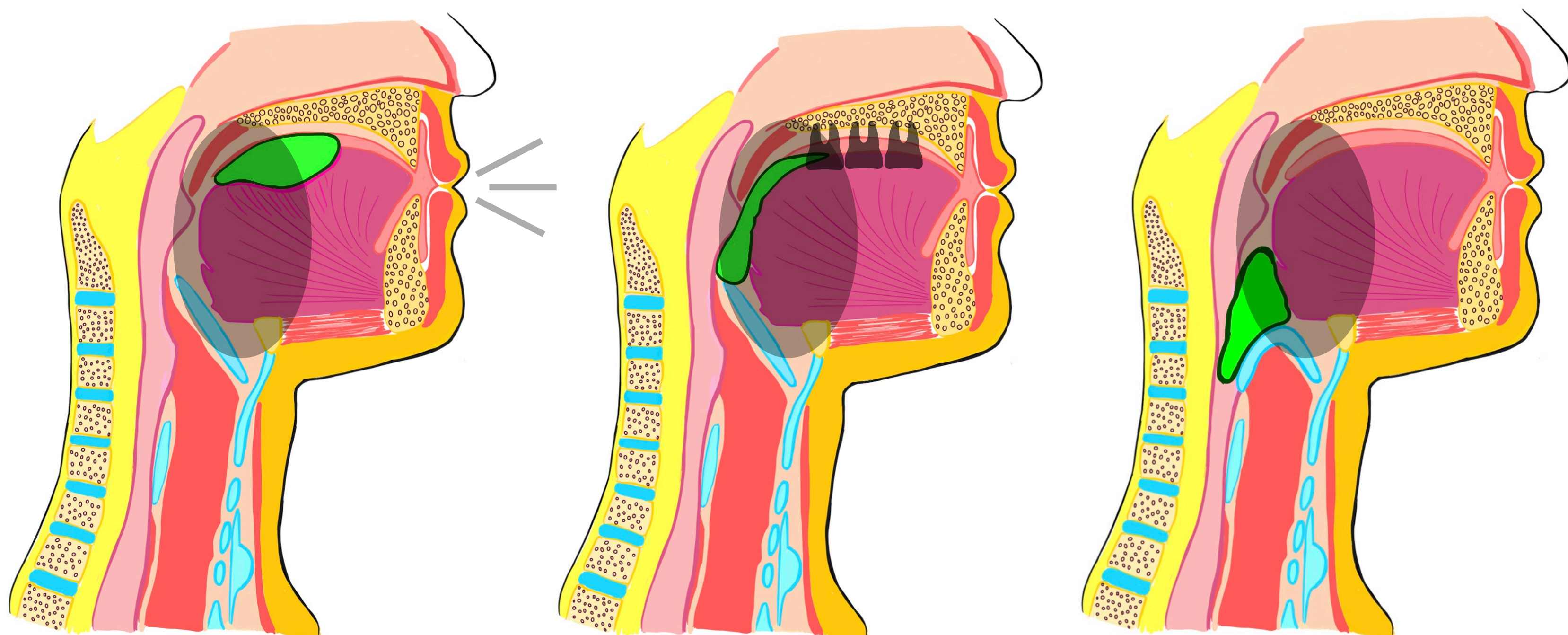


Figure: Oropharyngeal cancers (dark shade) can impact various domains of QOL such as oral health, speech, swallow, diet, activity, emotion, psychological, social

METHODS:

Population (P) = Radically treated OPCs

Intervention (I) = UWQOL, MDADI, EORTC HN35 & QLQC30

Comparison (C) = Primary Surgery (PrimSx) vs Primary Chemoradiotherapy (PrimCRT)

Outcomes (O) = Domain scores

Studies (S) = All types, >20 patients, QOL at >1 year

- Search performed from January, 1970 through July, 2020
- M-CID considered at 10% change from maximal scores

- Ratio of absolute differences in weighted means (based on sample size) between PrimSx and PrimCRT, and M-CID, was graded in 10% increments

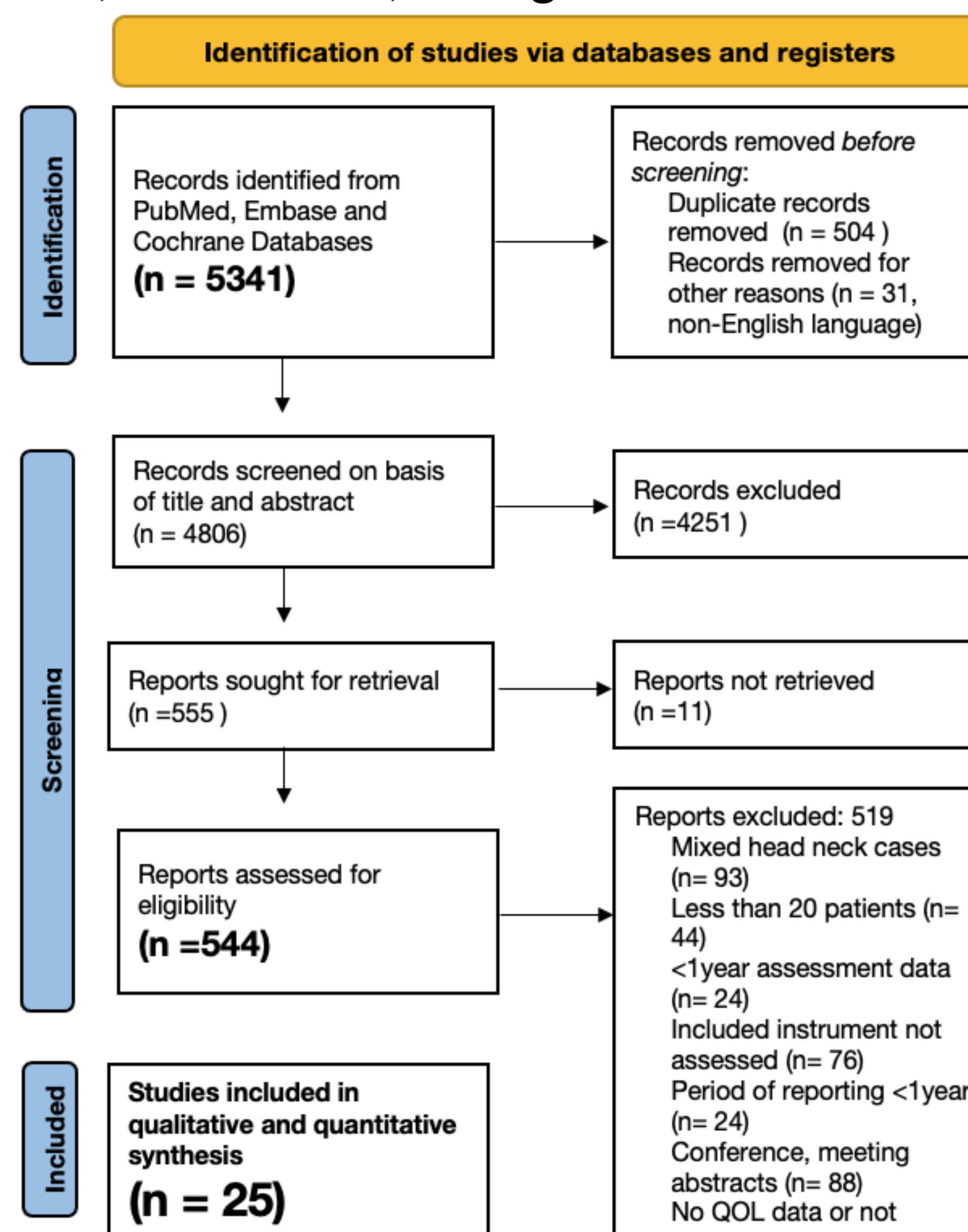


Figure: Search strategy using terms such as: QOL, health-related quality of life, oropharynx, tonsil, tongue base, soft palate, malignancy

RESULTS:

- 3230 responses across 10 countries, from 1981 till 2018
- Majority were T1/T2 tonsil tumors, but stage III/IV tonsil > BOT cancer

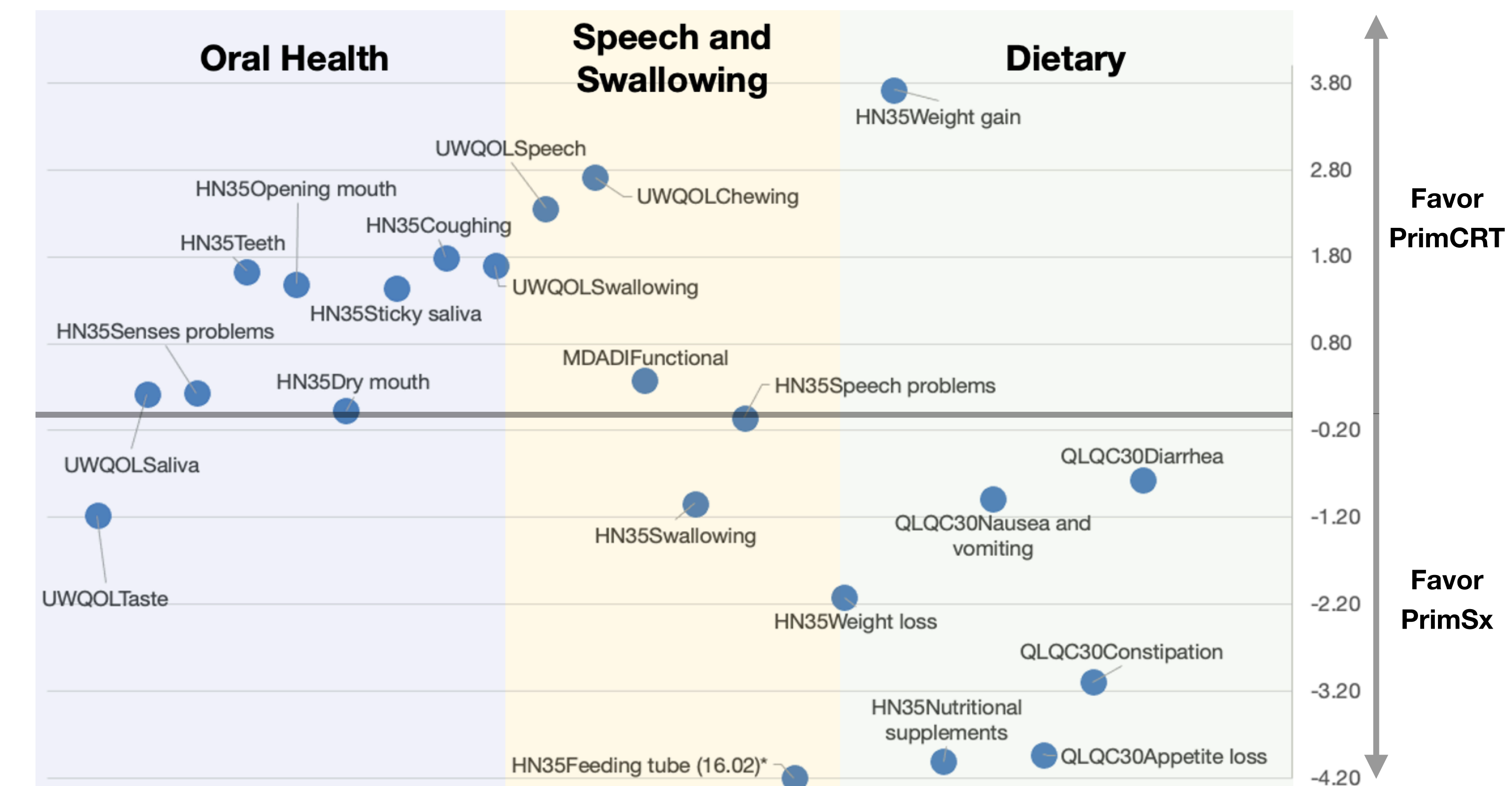
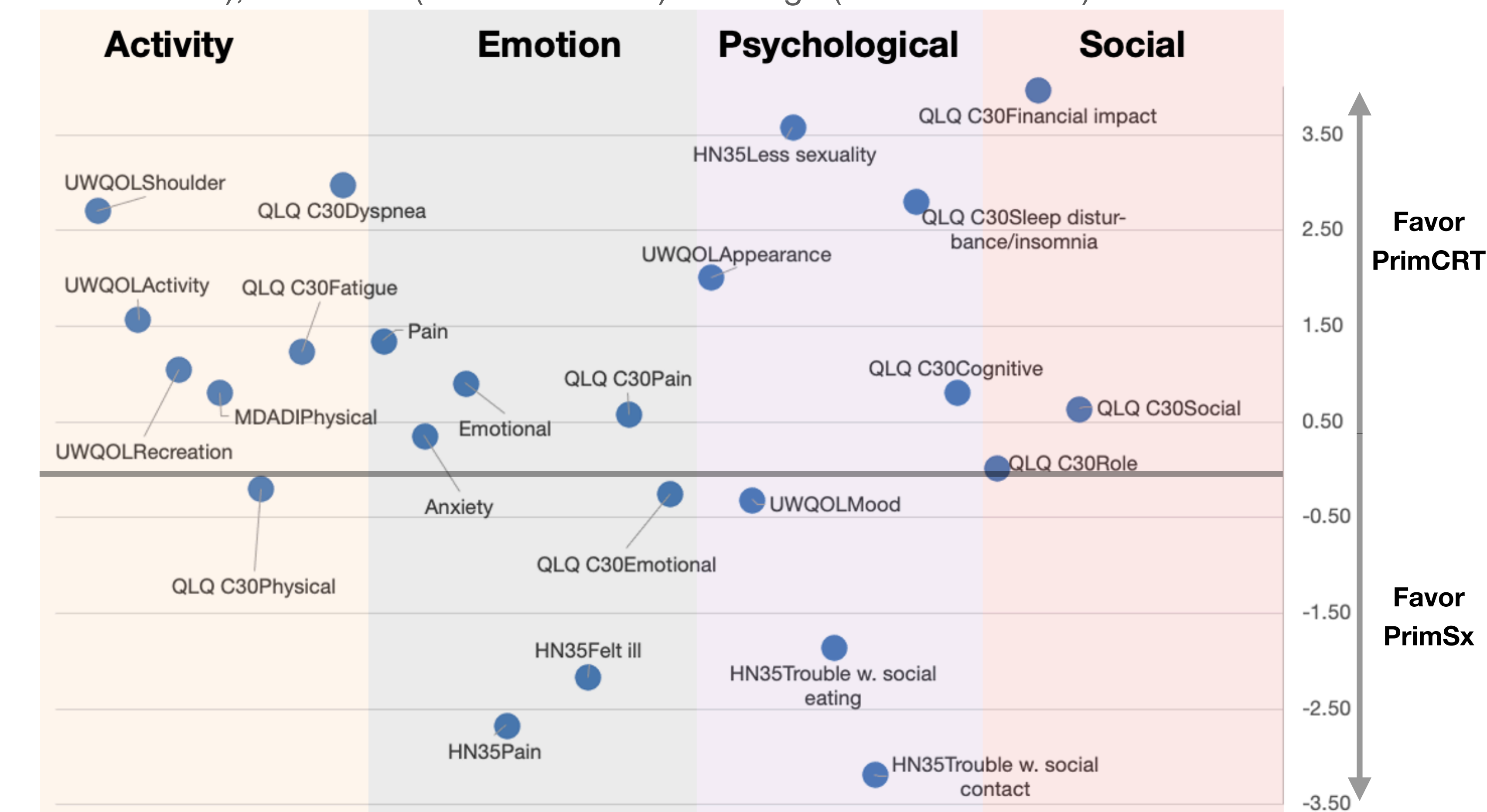


Figure: Weighted domain scores demonstrating MCIDs as nil (-0.99 to 0.99), minimal (-/1.00 to -/1.99), moderate (-/2.00 to -/2.99) and large (<-3.00 to >3.00) for PrimSx vs PrimCRT



CONCLUSION: Various aspects of QOL are differentially impacted by the type of treatment received. This study highlights the concerns of various stakeholders, including patients and physicians, that could impact treatment decisions.