

ASSESSMENT OF SYMPTOM BURDEN AMONG PATIENTS DIAGNOSED WITH GASTROINTESTINAL (GI) MALIGNANCIES ADMITTED TO RECEIVE CHEMOTHERAPY AT THE INSTITUTE FOR ONCOLOGY AND RADIOLOGY OF SERBIA (IORS)

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2018
28-30 JUNE
VIENNA, AUSTRIA

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MAKES EXCELLENT
CANCER CARE POSSIBLE



2018
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SUPPORTIVE CARE IN CANCER



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Faculty Disclosure

x	No, nothing to disclose
	Yes, please specify:

<i>Company Name</i>	<i>Honoraria/ Expenses</i>	<i>Consulting/ Advisory Board</i>	<i>Funded Research</i>	<i>Royalties/ Patent</i>	<i>Stock Options</i>	<i>Ownership/ Equity Position</i>	<i>Employee</i>	<i>Other (please specify)</i>



Background and context

Patients with advanced cancer experience high rates of both physical and psychological symptoms

Symptom management guided by patient's self-report of symptoms (PROs) leads to better symptom management, improvement in QoL and prolong OS

Basch E. N Engl J Med 2017 376: 106-107

Basch E, Snyder C. Ann Oncol 2017; 28(9): 2332-23



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Objective of the study

To assess symptom burden in patients with metastatic GI malignancies scheduled to receive their 1st cycle of chemotherapy at the IORS



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Methods

- Patients with metastatic rectal, colon and gastric cancer were included
 - Severity of symptoms was assessed at the time of admission, before chemotherapy
 - Edmonton Symptom Assessment System PRO tool (ESAS questionnaire)*
 - Each symptom is rated from 0 to 10 on a NRS;
 - 0 = symptom is absent
 - 10 = worst possible severity
-
- Descriptive statistics were used (mean scores)

*ESAS available in Serbian language



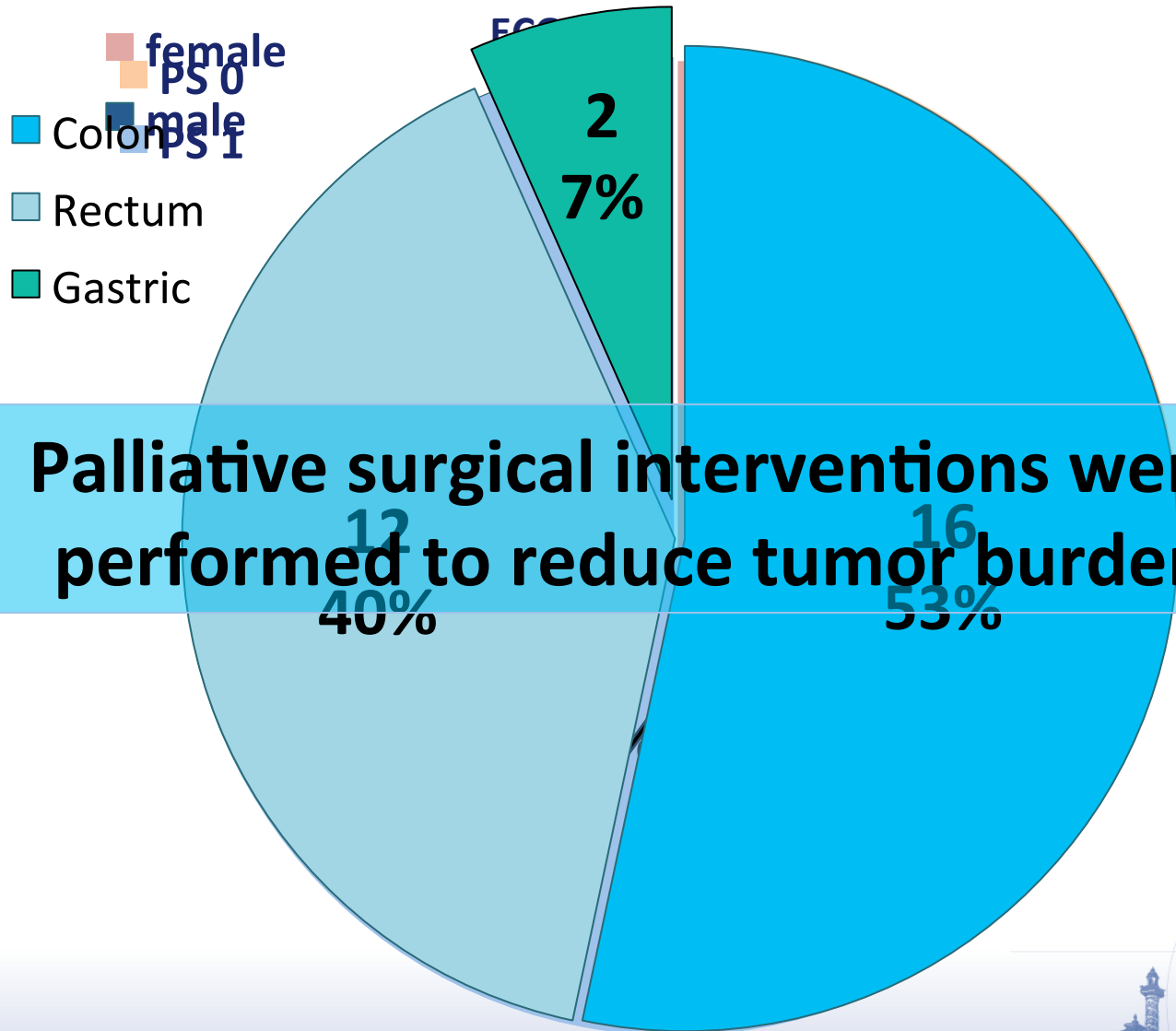
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Results: N=30



Palliative surgical interventions were performed to reduce tumor burden



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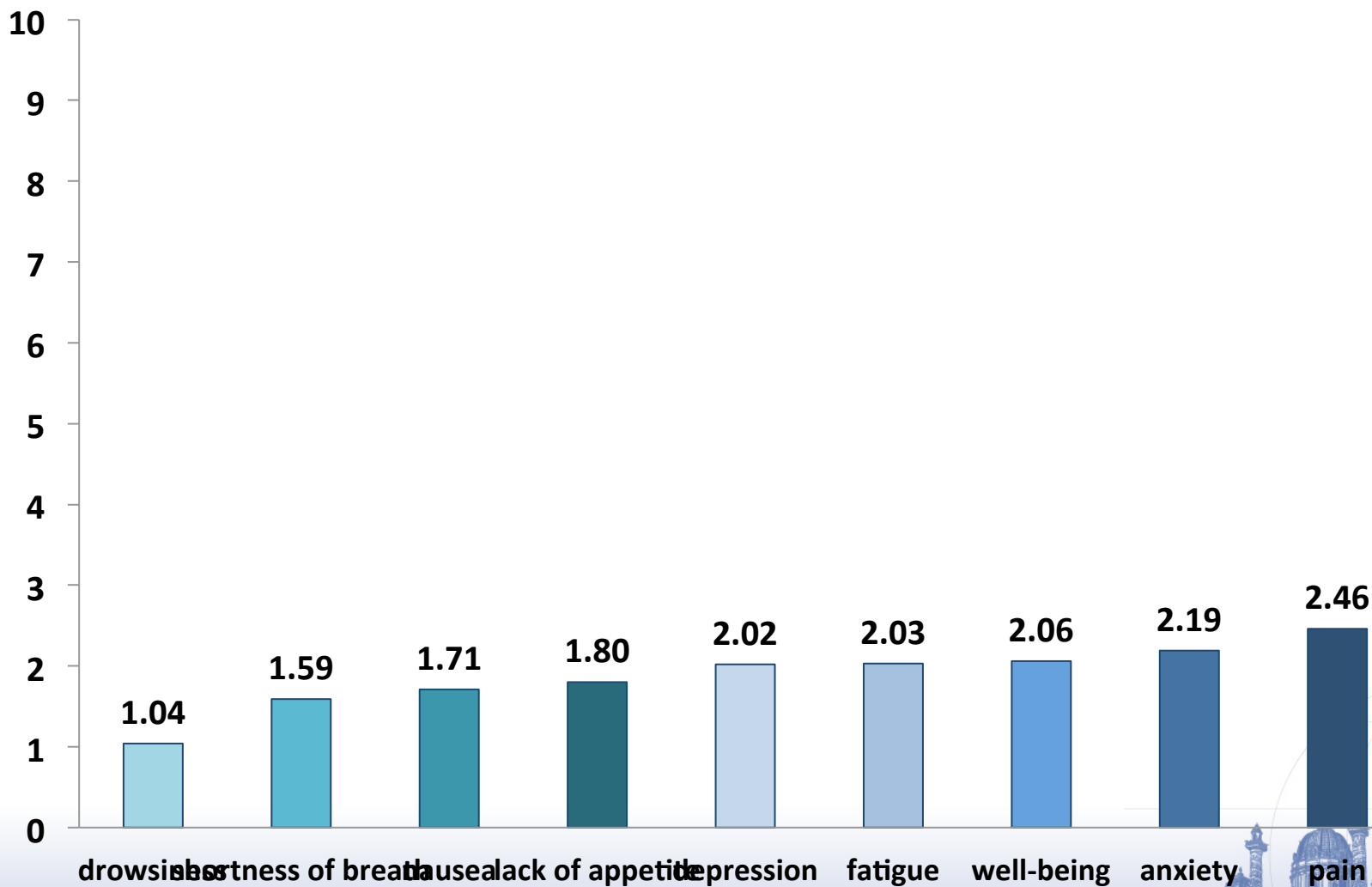
Results –symptoms (mean scores)



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Conclusions

- Our analysis showed mild symptoms and low symptom burden in patients with metastatic GI cancers
- In the Canadian study 58% of patients with GI malignancies reported moderate to severe symptom burden during 1 year after diagnosis*
- Regular assessment of symptom burden will enable individual, symptom-based tailoring of treatment



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**Bubis LD, et al. JCO 2018*

