

RESPONSE SHIFT IN INDIVIDUALISED QUALITY OF LIFE AND SYMPTOMS IN PATIENTS WITH ADVANCED PROSTATE CANCER

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INTRODUCTION:

Response Shift (RS), the adaptation to chronic disease, may lead to a change in a respondent's standard of measurement in longitudinal assessment of QoL or symptomatology, leading to invalidity in comparison of such assessments. Many methods have been suggested to measure RS, of which the most established is the use of the retrospective pre-test.

PATIENTS & METHODS:

Newly diagnosed patients with advanced prostate cancer completed the Schedule for the Evaluation of Individualised QoL (SEIQoL), IPSS and Symptom Problem Index (SPI), at the time of diagnosis and 3 months later. At the second assessment, patients retrospectively re-assessed their initial QoL and symptoms.

RESULTS:

76 patients were recruited. Initial mean SEIQoL score was 75.6 changing to 76.2 at 3 months (not statistically significant). Retrospectively, patients re-assessed their initial score as 66.7, suggesting a RS of 8.9 points ($p<0.001$) and an actual improvement in QoL of 9.5 points ($p<0.001$). The mean IPSS changed from 11.0 initially to 8.2 at 3 months – the retrospective score was 12.4 (RS = 1.4 points, $p=0.06$). The mean SPI changed from 6.7 initially to 4.6 at 3 months. The retrospective score was 8.5 (RS = 1.8, $p=0.003$). No significant changes occurred in 17 age-matched controls.

CONCLUSION:

These results suggest that a significant response shift is occurring in this group of patients. Traditional pre and post-test data would suggest no change in QoL, whereas the then-test reveals an improvement in QoL by almost 10%. This clearly has significance clinically as well as statistically. The study calls into question the interpretation of all studies that do not allow for RS.