

QUALITY OF LIFE AND LATE URINARY MORBIDITY IN PATIENTS SUBMITTED TO PROSTATIC BRACHYTHERAPY FOR LOCALIZED PROSTATE CANCER

Hypothesis / aims of study

Brachytherapy is a valid treatment option for localized prostate cancer, frequently associated with low morbidity and good health related quality of life (HR-QoL) levels. The HR-QoL should be a health concern for doctors and patients in clinical decisions. There are few randomized studies relating the late urinary morbidity and HR-QoL in patients submitted to prostatic brachytherapy. The aims of this study are: study the late urinary morbidity and HR-QoL in patients submitted to prostatic brachytherapy; assess the impact of pre-treatment IPSS score in the development of urinary morbidity; assess and characterize late urinary morbidity and HR-QoL in patients submitted to prostatic brachytherapy; assess the impact of urinary incontinence in HR-QoL and patient global satisfaction.

Study design, materials and methods

All patients submitted to prostatic brachytherapy in a single urology department, between October 2003 and October 2013 were asked to answer the EPIC, AUA-SS and ICIQ-SF questionnaires. The results were treated in function of pre-treatment IPSS score, patient's age and time since the brachytherapy date.

Results

From 410 patients, 11 died and 133 (32,4%) validly answered to the questionnaires. The median follow-up was 4,32 years (SD=2,5 years). The development of specific low urinary tract symptoms was independent of pre-treatment IPSS score. Nocturia was the main developed symptom. 30,82% of patients suffer from some degree of urinary incontinence, but only 13 patients (9,77%) said it was a severe problem. The development of urinary incontinence has an important impact on global satisfaction. There was a possible relation between pre-treatment IPSS score and the development of LUTS, urinary incontinence and urinary bother.

Interpretation of results

The presence of pre-treatment LUTS do not significantly influence the development of specific LUTS but has an impact in global urinary morbidity development in patients submitted to prostatic brachytherapy; The most prevalent symptom was nocturia; Incontinence appears to be a sub estimated problem and has an important impact in patients satisfaction and HR-QoL; The development of late urinary morbidity is independent of patients age at time of brachytherapy.

Concluding message

Brachytherapy patients satisfaction and HR-QoL are high and it is a well-accepted treatment.

References

1. Hashine K, Yuasa A, Shinomori K, Ninomiya I, Kataoka m, Yamashita N. Health-related quality of life after radical retropubic prostatectomy and permanent prostate brachytherapy: a 3-year follow-up study. *Int J Urol* 2011;18(12):813-9
2. Miller DC, Sanda MG, Dunn RL, Montie JE, Pimentel H, Sandler HM, McLaughlin WP, Wei JT. Long-term outcomes among localized prostate cancer survivors: health-related quality-of-life changes after radical prostatectomy, external radiation, and brachytherapy. *J Clin Oncol* 2005;23(12):2772-80
3. Frank SJ, Pisters LL, Davis J, Lee AK, Bassett R, Kuban DA. An assessment of quality of life following radical prostatectomy, high dose external beam radiation therapy and brachytherapy iodine implantation as monotherapies for localized prostate cancer. *J Urol* 2007;177(6):2151-6

Disclosures

Funding: NONE **Clinical Trial:** No **Subjects:** HUMAN **Ethics Committee:** Comissão de Ética do Hospital de São José **Helsinki not Req'd:** It is not a clinical trial **Informed Consent:** Yes