

A qualitative research study in Japan investigating patients' experience with metastatic castration-resistant prostate cancer (mCRPC): from diagnosis to decision for Radium-223 (Ra-223) treatment



Authors

Koichiro Akakura, Hiroji Uemura, Kikuko Miyazaki, Angela Stroupe, Caroline Seo, Alyssa Uzumcu & Dianne A Ledesma



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Overview



Qualitative study



23 mCRPC patients designated to receive Ra-223 and 3 physicians surveyed for the study



Survey aimed to explore patients' experience with bone mCRPC

Patients

Inclusion criteria

- ✓ Age 20 years or older
- ✓ Two or more bone metastases and no visceral metastasis
- ✓ ECOG-PS scores 0–2
- ✓ Designated by physician to start receiving Ra-223 treatment in routine clinical practice
- ✓ At the time of screening, a participant at the investigator's site or referred from other clinics/hospitals to investigator's site specifically for Ra-223 treatment
- ✓ Able to provide written, informed consent (in Japanese)

Exclusion criteria

- † A clinically relevant medical or psychiatric condition which, in the opinion of the investigator and/or coordinator, would interfere with completing the study including, but not limited to, sensory problems, cognitive impairment and acute mental illness
- † Participating in an investigational program with interventions outside of routine clinical practice

Physicians

Inclusion criteria

- ✓ A board-certified physician in any of the following specialties: urology, oncology or radiology
- ✓ Must have treated at least three Japanese bone mCRPC participants in routine clinical practice in the past
- ✓ Must have prescribed at least one Ra-223 treatment cycle to a bone mCRPC participant in the past 12 months
- ✓ Able to provide a written, informed consent (in Japanese)

Methodology

Patient Interview

Patients were interviewed and any words/phrases relating to symptoms/impacts in relation to CRPC were coded and categorized.

Physician Interview

Physicians were interviewed to get context on disease and treatment.



1 Oncologist 1 Urologist 1 Radiologist

Saturation Method

Data was analyzed and coded for every 5 patient interviews until saturation



Pain

"The pain was from my back to my hips. The prescriptive pain medication that I was taking wasn't working at all. Ultimately, the doctor decided to increase the 'base'."



Musculoskeletal

"I did experience some back pain after some tests. After the test, when I'd lean forward to read a newspaper, I would feel a sharp pain in my back."



Emotional/psychological

"The doctor told all of us (family) that I had malignant cancer. As soon as I heard that I had cancer, and that it was cancer with malignancy degree of 9, I panicked. My head was a mess."



Daily physical activities

"As treatment progresses, I feel I am slowing down more and more. For example, I used to drive often, but I've been avoiding it, and I'm starting to avoid riding bikes too."

Results

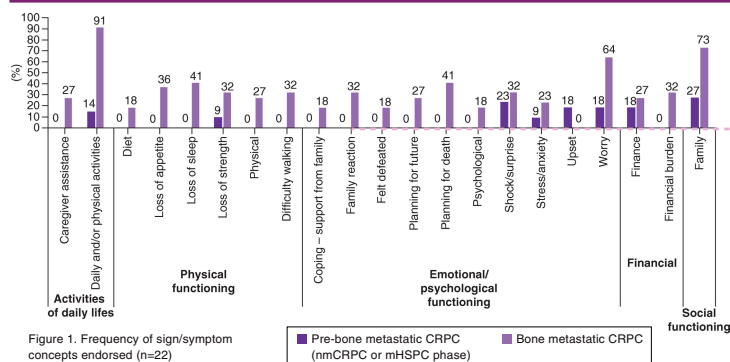


Figure 1. Frequency of sign/symptom concepts endorsed (n=22)

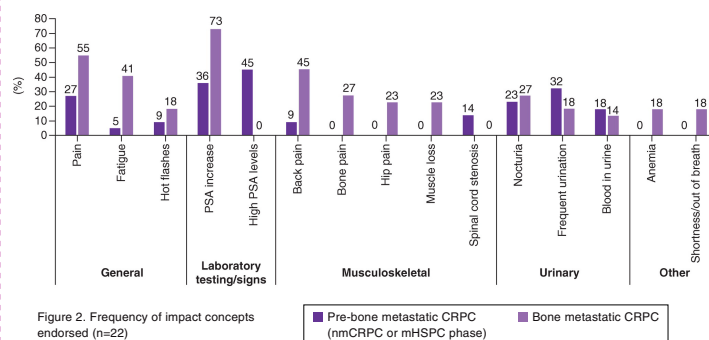


Figure 2. Frequency of impact concepts endorsed (n=22)

Summary points

- This study revealed that the symptoms and impacts of living with mCRPC and the associated burden of bone metastasis and skeletal-related symptoms are considerable and varied.
- As previously noted in similar research, pain in general and pain associated with skeletal-related events were the most significant symptoms in mCRPC patients' experiences. Patients' experiences of pain was a key impact in their daily lived experiences.
- Health-related quality of life impacts are also highlighted in the results of this study. Physicians expressed patients' anxieties about their condition as being the most prevalent impacts seen in a clinical setting. Patients interviewed in this study most frequently reported impacts to their daily activities, physical functioning, emotional, social and financial well-being.
- Patients had high expectations from the benefits of Ra-223 treatment. Ra-223 has shown treatment benefit in terms of extending the time until the occurrence of symptomatic skeletal events, extending overall survival and maintaining quality of life during treatment.
- Information sharing for both patients and physicians is a key component to easing concerns and utilizing Ra-223 treatment.