

Mesure de la qualité de vie durant une chimiothérapie adjuvante du cancer colorectal. / [Assessment of the quality of life during adjuvant chemotherapy of colorectal cancer].

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Abstract

Enhanced 5 year survival rates with adjuvant chemotherapy for colon and rectal cancers are 5% and 9% respectively, according to recent meta-analysis. Despite the NIH consensus statement endorsing adjuvant chemotherapy, many clinicians regard such a seemingly small benefit not just worthy of the expense, inconvenience, discomfort and risk of treatment for their individual patient with colorectal carcinoma. The aim of this study is to evaluate these quality of life issues. The seven criteria considered most important were determined by interviews of treated patients, who emphasized the following quality of life parameters: nausea and vomiting, diarrhea, perineal dermatitis, asthenia, impairment of daily activity, family support, and difficulties of daily transportation to hospital. A numeric scale (1-5) was used to measure their answers (0 = hospitalization, 5 = no modification), and the nonparametric rank coefficient of Kendall was used to compare them. Twenty patients with colon cancer treated with Moertel's protocol and 5 patients with rectal cancer treated with Krook's protocol were evaluated. The study revealed a diminished quality of life for both patients with colon cancer (7 on a scale of 10) and those with rectal cancer (6 on the same scale). By using the same questionnaire at one week interval, the responses remained unchanged ($p < 0.001$). The effect of radiotherapy seems to be responsible for this difference. This study is one of the first to approach the quality of life from the real interested party's point of view: the patient.

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