PROSTATE CANCER

Quality of life factors predict satisfaction with care

Patient satisfaction with prostate cancer care is primarily determined by patient-reported factors, such as health-related quality of life (HRQoL) and fear of recurrence, rather than demographic, clinical or treatment measures, according to a study published in *BJU International*.

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Matthew Resnick and colleagues sought to identify the parameters associated with post-treatment satisfaction with prostate cancer care, an area that has not been extensively studied. “Our findings have considerable implications for pre-treatment identification of patients at risk of poor satisfaction outcomes,” says Resnick.

Researchers analysed data from 3,056 men in the Cancer of the Prostate Strategic Urologic Research Endeavor database who were diagnosed with cT1–3

disease and had completed HRQoL questionnaires at the time of enrollment and at regular intervals after treatment. Satisfaction with care was measured before treatment and between 1–2 years after treatment using a nine-question instrument encompassing contact with providers, confidence in providers, communication skills and humanness.

Logistic regression analysis revealed that only patient-reported variables were strongly associated with satisfaction; sociodemographic characteristics (age, race or ethnicity, education, relationship status), clinical characteristics at diagnosis (PSA level, Gleason grade, T stage), and treatment variables (type, receipt of neoadjuvant treatment, time from diagnosis to treatment, type of clinical facility) were not.

Resnick *et al.* noted that higher HRQoL at baseline was associated with improved satisfaction ($P < 0.01$), an increased fear of recurrence was associated with a decrease in satisfaction ($P < 0.01$), and declines in sexual function ($P < 0.04$), urinary function

($P = 0.02$) and bowel function ($P < 0.01$) were each associated with a twofold lower post-treatment satisfaction.

Not only do these results suggest that men at high risk of post-treatment dissatisfaction should be counselled accordingly throughout the decision-making process, but that efforts should be made to improve pretreatment HRQoL (relating to both urological and psychological function) in these patients. “As we move towards value-based care, it is clear that patient-reported outcomes will become increasingly important,” Resnick told *Nature Reviews Urology*. “The real challenge will be to develop and apply methods to improve satisfaction at the population level.”

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Original article Resnick, M. J. et al. Factors associated with satisfaction with prostate cancer care: results from Cancer of the Prostate Strategic Urologic Research Endeavor (CaPSURE). *BJU Int.* doi:10.1111/j.1464-410X.2012.11423.x.