Quality of life among patients with esophageal/gastric cardia precancerous lesion or cancer: one-year prospective survey

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The objectives of the study were to assess the health related quality of life (QOL) among patients with esophageal/gastric cardia precancerous lesion or cancer at different stages, and evaluate changes in QOL during follow-up after primary treatment.

**Methods**

We enrolled 220 patients with esophageal/gastric cardia lesion between September 2007 and January 2010. They were followed up with the EuroQol-5 dimension (EQ-5D) for health-related QOL before primary treatment and at 1, 6 and 12 months after primary treatment. We calculated the EQ-5D scores based on the five-item descriptive system of health states and the UK preference weighting system.

In total, 74 patients with precancerous lesion, 88 with early stage cancer, and 58 with advanced cancer participated in our survey.

Prior to primary clinical treatment, the average EQ-5D score for patients with advanced cancer was 0.81±0.17 (mean ± standard deviation), significantly lower than that for patients with early stage cancer (0.87±0.09) or precancerous lesion (0.90±0.05) (P<0.01).

For the precancerous lesion, the score declined in the first month (P<0.001), and gradually increased to a higher level at 12 months than before treatment (P=0.023).

It showed a similar trend for early stage cancer (P<0.05), though it was not statistically recovered even at 12 months (0.85±0.15 versus 0.87±0.09, P=0.226).

Regarding advanced cancer, the score showed a consistent decline, reached the lowest at 6 months, and finally rebounded to a similar level compared to that before treatment (0.80±0.13 versus 0.81±0.17, P=0.624).

Our results indicate that patients with precancerous lesion or early stage esophageal/gastric cardia cancer have better QOL than do those with advanced cancer. Early detection and treatment improve QOL in the long run, despite QOL compromise in the immediate time. Particular attention and extra care should be given in the early period of treatment for all patients.