

Systematic Literature Review of Health-Related Quality of Life in Unresectable Locally-Advanced, Advanced/Metastatic Oesophageal Cancer

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Introduction

- Oesophageal cancer (OC) is the sixth leading cause of cancer related mortality globally with 957,000 projected cases by 2040, a 58.4% increase in cases compared to 604,000 in 2020.¹
- Most OC patients experience deteriorated quality of life (QoL) due to delayed diagnosis (at an advanced stage) as the clinical signs are rarely evident at the early stage of the disease.^{2,3}
- Patients with metastatic or unresectable OC do not have curative-intent chemoradiotherapy as an option and typically face poor prognosis. Historically, clinical trial data have shown survival rates of less than one year for this patient subset. Nonetheless, there is encouraging progress in improving survival within this group due to the recent integration of Immune Checkpoint Inhibitors (ICIs) in combination with Chemotherapy (ChT).⁴
- This systematic review aims to evaluate the impact of treatment and disease progression on HRQoL and emphasizes the need for further research and treatments for OC.

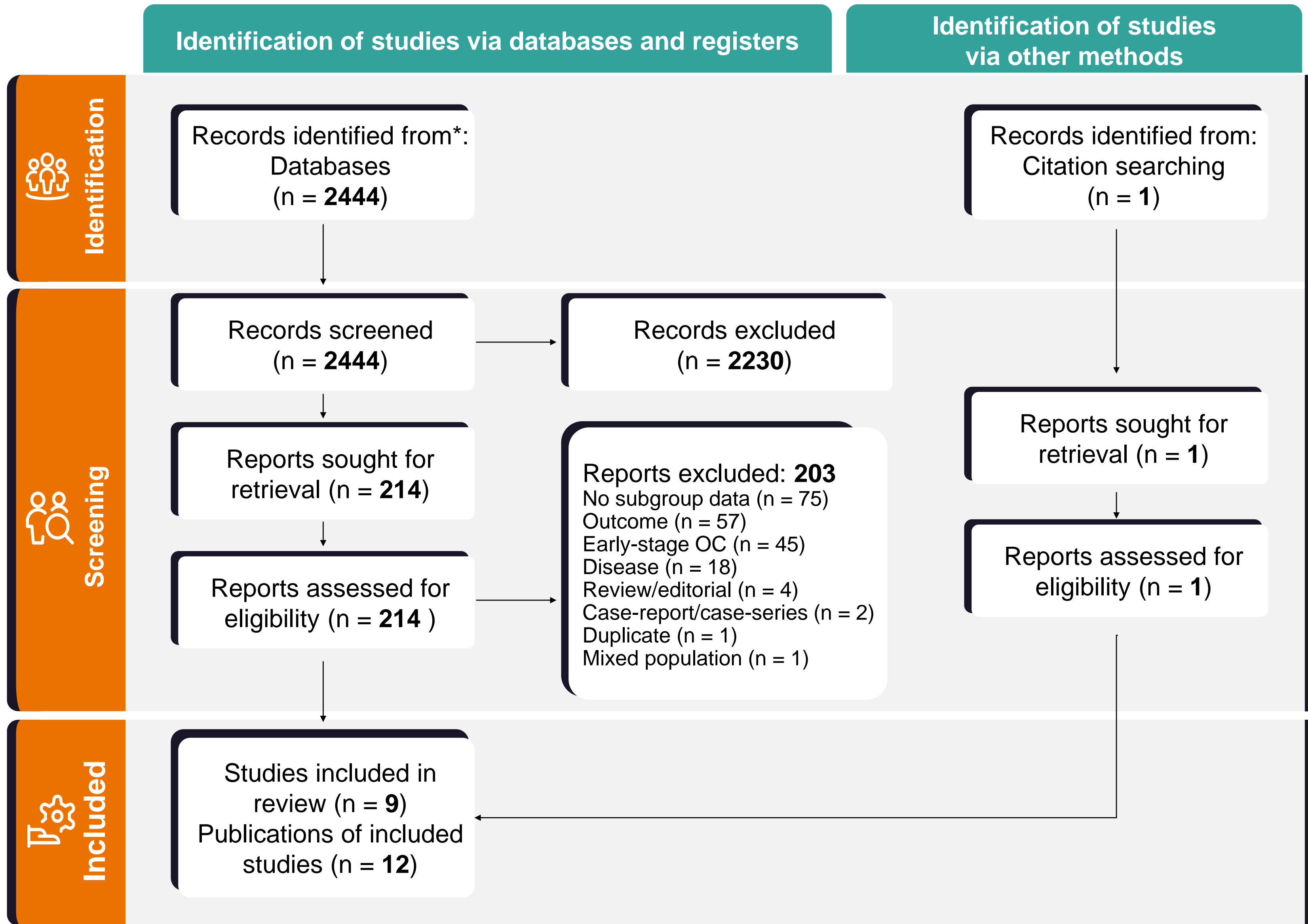


Methods

- We conducted a systematic literature review (SLR) in accordance with Preferred Reporting Items for Systematic Reviews and Meta-Analyses (PRISMA) guidelines⁵. Biomedical databases; Medline®, Embase® (via Ovid®) and Cochrane Library were searched for last 10 years.
- Two independent reviewers performed screening and data extraction, and any conflicts were resolved by a third independent reviewer, when necessary, to ensure methodological rigor.

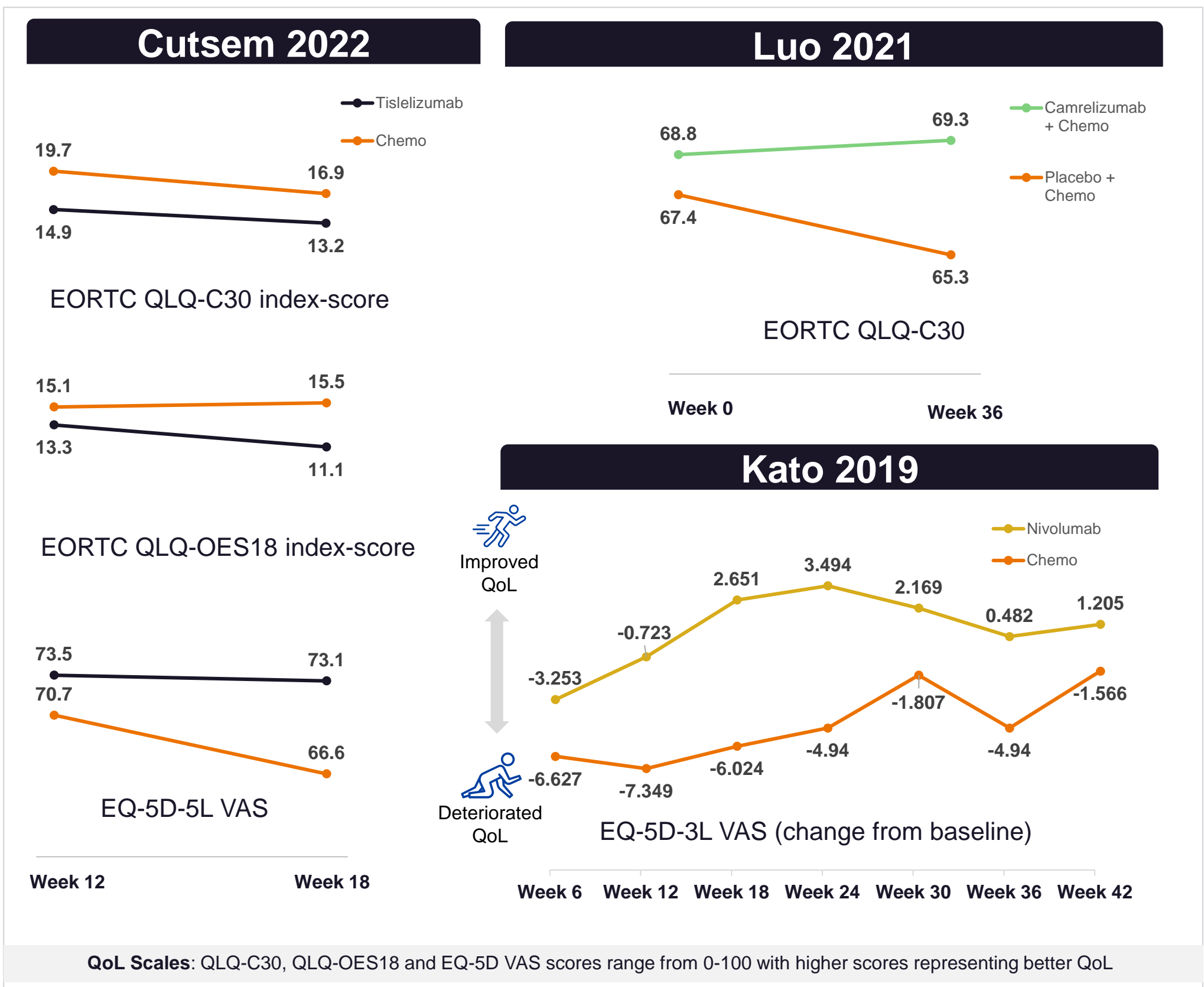
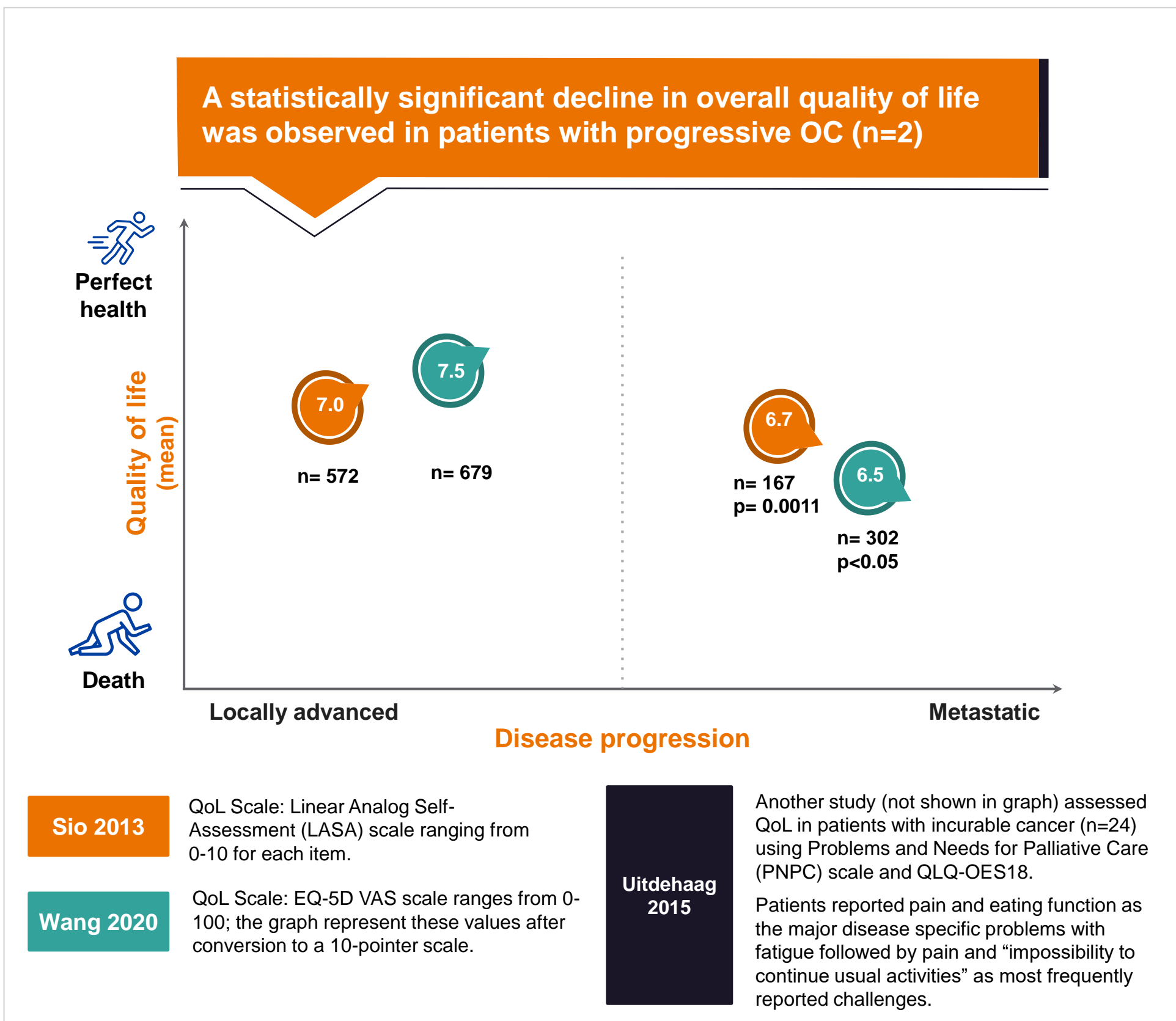
Eligibility criteria are listed below:

Population	Adult patients with unresectable locally-advanced, metastatic oesophageal cancer
Interventions & Comparators	No restriction
Time frame	Jan 2013 to May 2023
Study design	Any study reporting HRQoL evidence (excluding case reports and case series)
Language	English language publications
Country	No restriction



Results

- Of 2444 citations screened, nine studies (12 publications) including five RCTs and four observational studies met the predefined eligibility criteria assessing HRQoL in advanced unresectable or metastatic OC patients.
- The literature review showed a strong correlation between disease progression and decline in patients' quality of life.^{6,7} As the disease advanced, patients with OC experienced a significant deterioration in their physical and emotional health.⁶ Additionally, patients also reported feeling extremely tired and fatigued, which made it difficult for them to perform everyday activities.^{6,8} This highlights the importance of early intervention and effective treatment strategies to mitigate disease progression while improving and maintaining patients' quality of life.
- The effect of treatment with certain ICIs (i.e., camrelizumab or nivolumab) with/without ChT resulted in a significant QoL gain in comparison to traditional chemotherapies in patients with OC.^{9,10} Another study assessing the impact of tislelizumab reported that the overall HRQoL including tiredness symptoms and physical functioning was either maintained or improved in patients treated with tislelizumab in comparison to ChT.¹¹
- Thalidomide in combination with paclitaxel and cisplatin had significantly better QoL in comparison to paclitaxel and cisplatin in patients with OC.¹²



Study, QoL tool	QoL	Results
Mansoor 2021 <ul style="list-style-type: none">EORTC QLQ-C30EORTC QLQ-OES18EQ-5D-5L		HRQoL remained stable and similar over 18 weeks for both the treatment arms
Adenis 2019 <ul style="list-style-type: none">EORTC QLQ-C30EORTC QLQ-OES18		HRQoL remained stable and similar over 9 weeks for both the treatment arms
Luo 2021 <ul style="list-style-type: none">EORTC QLQ-OES18		Camrelizumab-chemotherapy resulted in a statistically significant higher HRQoL in comparison to chemotherapy group for eating and swallowing at week 36



Conclusion

- The evidence suggests that disease progression leads to a decline in health-related quality of life of patients with OC, significantly impacting their ability to function and perform daily life activities.
- Immunotherapies were observed to improve or maintain the QoL in OC patients compared with chemotherapies. Psychological, social, early diagnosis and timely treatment are needed to improve the quality of life of patients with OC.

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