

Differences in Patient-Reported Outcomes Among Breast Cancer Patients in Japan Based on Comorbidities Experienced: Results from a Cross-Sectional Survey

Michael LoPresti¹⁾, Kosuke Shichiku¹⁾, Mitsunori Morita¹⁾
1) INTAGE Healthcare Inc., Chiyoda-ku, Tokyo, Japan

Key points of this study

- ✓ 35% of patients were treated only for breast cancer and 65% were also treated for another condition.
- ✓ The healthcare-related quality of life (HRQoL) scores and treatment satisfaction vary depending on patient’s conditions.
- ✓ Further research is needed to understand how complications and comorbidities can affect the perceived benefit of new treatments.

INTRODUCTION

- Breast cancer treatment is associated with complications such as pain, fatigue, nausea, diarrhea, and more.
- Breast cancer patients may also suffer from other unrelated comorbidities.
- Complications and comorbidities may lead to differences in patient-reported outcomes (PROs).
- We examined differences in PROs among breast cancer patients in Japan depending on their treatment for other conditions.

OBJECTIVE

- To identify differences in HRQoL and treatment satisfaction among breast cancer patients in Japan depending on other conditions (comorbidities) experienced

METHODS

- Data from the 2022 Patient Mindscape® survey was used, which is a nationwide survey among 500,000+ persons in Japan undergoing drug treatment for 80+ conditions.
- Persons that reported undergoing drug treatment for breast cancer within the past year were included.
- HRQoL and treatment satisfaction were considered for those that only underwent drug treatment for breast cancer and those that also underwent drug treatment for another condition from among the 80+ conditions included in survey.

RESULTS

1. Patient characteristics

- 1,682 breast cancer patients treated with drug therapy were identified. Among those, 35% were treated only for breast cancer and 65% were also treated for another condition.

2. HRQoL score

- Based on the EQ-5D-5L and EQ-VAS measures, those treated only for breast cancer reported better HRQoL, on average, than those also treated for another condition (Table 1).
- EQ-5D scores were lowest, on average, for those also treated for migraines, lower back pain, chronic constipation, or insomnia (Table 1). Differences observed for other conditions was limited,.
- Similarly, EQ-VAS scores were lowest, on average, for those also treated for migraines, lower back pain, chronic constipation, or insomnia (Table 1).

Table 1 HRQoL scores by condition		
Disease	EQ-5D	EQ-VAS
All	0.86	73.74
Breast cancer only	0.88	75.98
Breast cancer and other condition*	-	-
Glaucoma / ocular hypertension	0.88	73.96
Hypertension	0.87	73.68
Other cancer	0.87	73.67
Osteoporosis	0.87	76.04
Lipid disorders	0.86	72.38
Reflux esophagitis	0.86	76.30
Allergic rhinitis	0.86	70.42
Common cold	0.85	69.37
Eczema/Urticaria	0.85	69.87
Dry eye	0.85	74.28
Diabetes	0.84	70.01
Chronic constipation	0.79	66.76
Insomnia	0.79	63.92
Migraines	0.79	66.25
Lower back pain	0.77	66.65

Abbreviations: EQ-5D, the EuroQol-5-Domain-5-Level; EQ-VAS, EuroQol Visual Analogue Scale

*Patients may suffer for more than one comorbidty

3. Treatment satisfaction

- Breast cancer treatment satisfaction was similar for both groups, on average.
- However, those that were also treated for migraines, lower back pain, and other pain were less likely to indicate that they are extremely satisfied with their breast cancer treatment (Figure 1).

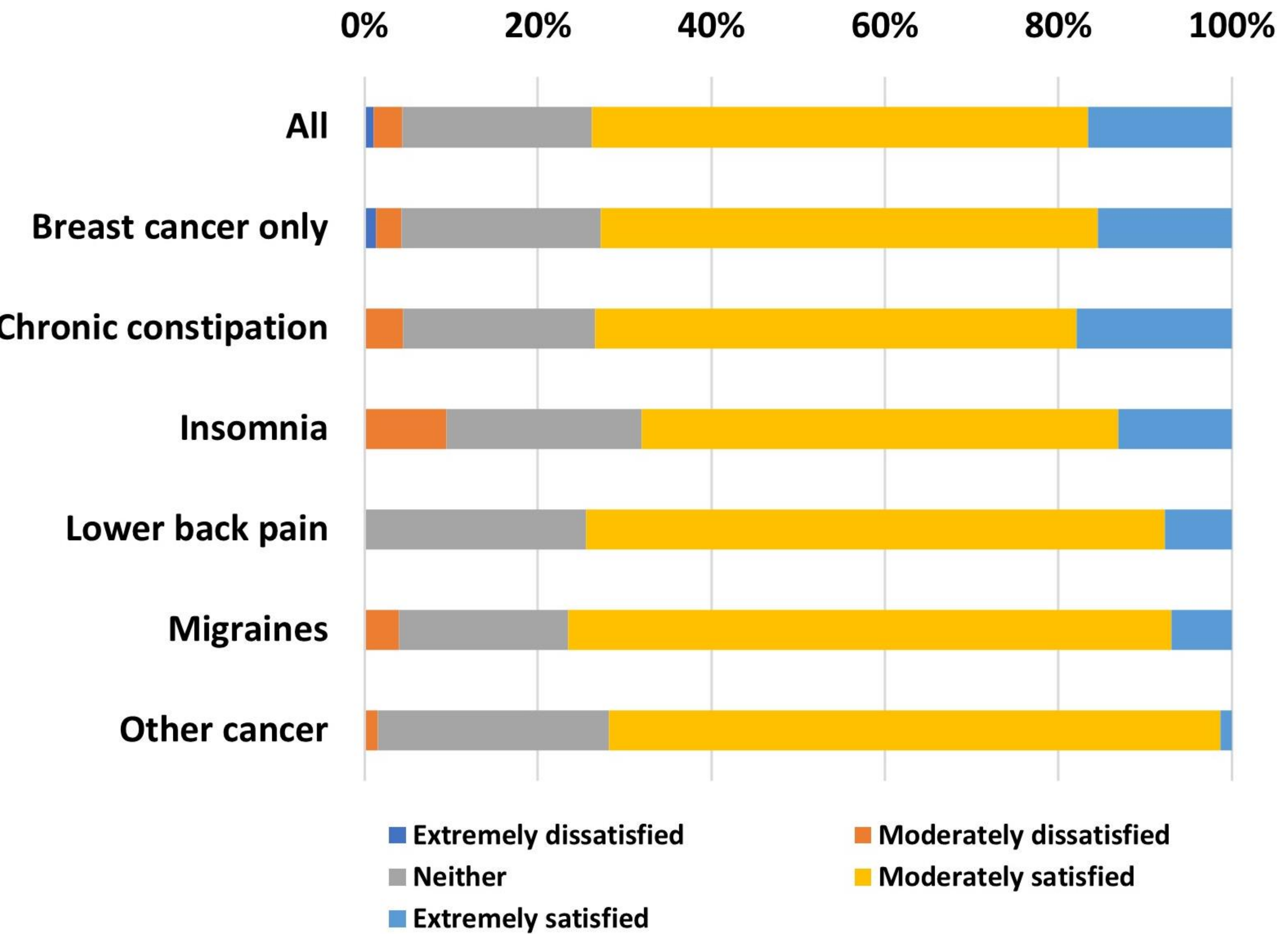


Figure 1 Treatment satisfaction

CONCLUSIONS

- This research shows that PROs for breast cancer patients may vary depending on their other conditions.
- Further research is needed to understand how complications and comorbidities can affect the perceived benefit of new treatments.
- Differences in HRQoL between groups (e.g., treatment and non-treatment arms) may not be informative unless the prevalence of other conditions is adequately accounted for.