



# Cancer Patients' Priorities When Considering a Treatment Decision

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## Introduction

In this era of shared decision-making and rising health care costs, health care value is increasingly entering clinical discussions. Several frameworks have been designed to measure value in cancer care.<sup>1,2</sup> However, patients might not understand value and findings suggest that patients define value in different terms.<sup>3</sup> Understanding patient priorities when deciding upon treatment is essential to effectively measuring value and communicating it to patients in clinical dialogue. Yet, the patient perspective is not yet fully understood nor integrated into the measurement of value. To contribute further to the patient perspective on value, we explored three ways to identify patient priorities when deciding upon treatment for cancer.

## Methods

From April 2015 to May 2016, 679 cancer survivors in the online Cancer Experience Registry answered questions about priorities when making a treatment decision.

- Using a 5-point Likert scale (not at all to very much), respondents rated the importance of the following factors when making a treatment decision:
  - Length of life (LoL)
  - Quality of life (QoL)
  - Impact on family
  - Financial cost of care
- Respondents also ranked the same factors in order of importance (1 most to 4 least important).
- Finally, respondents considered two factors at a time indicating which had greater impact on their decision.

## Results

**Table 1.** Sample characteristics among 679 cancer survivors with various diagnoses

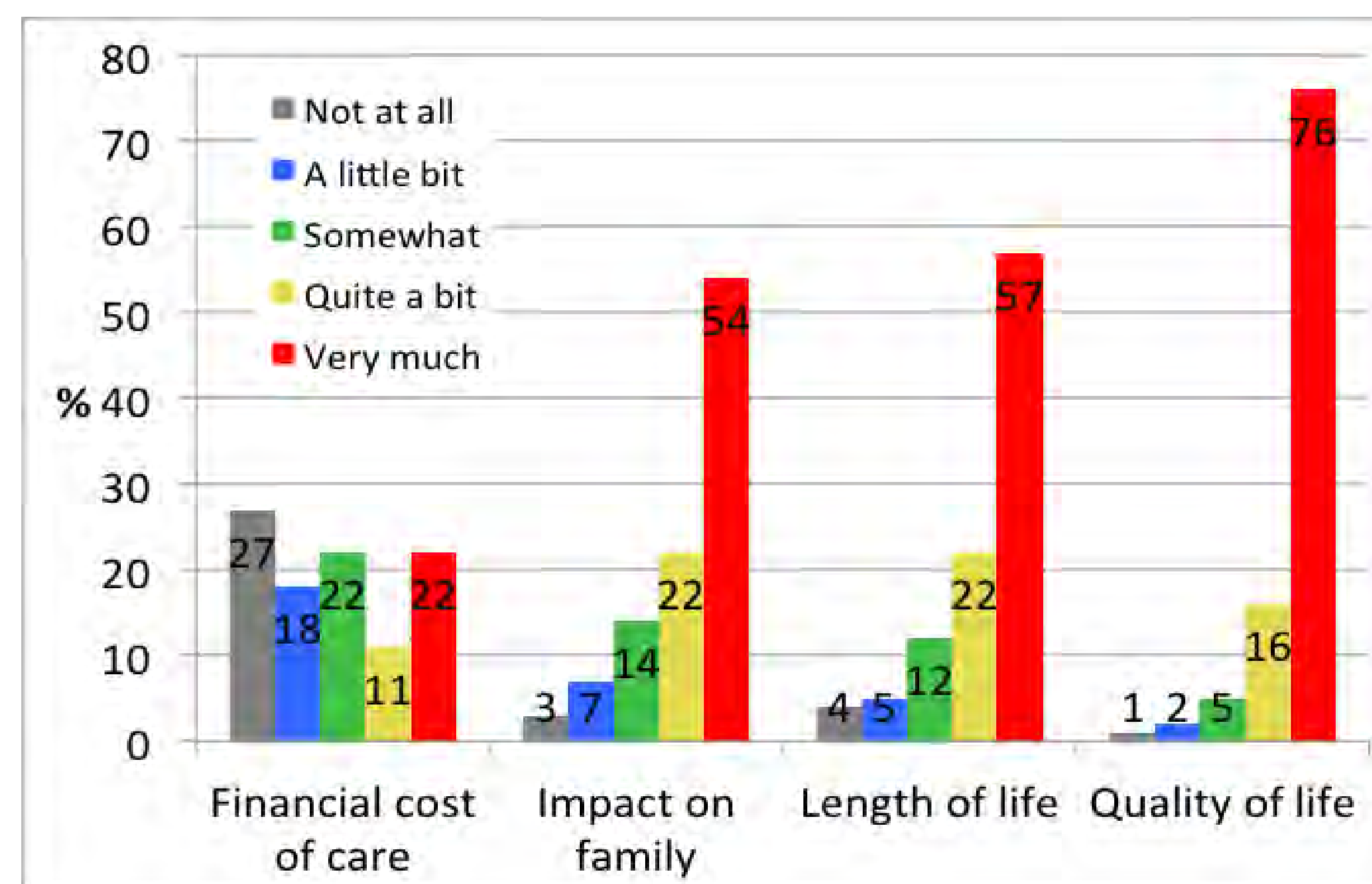
Characteristic	%
Female	77
Annual income <\$60K	40
At least college degree	67
Non-Hispanic white	89
Recurrence	24
Currently receiving tx	48
Age (median)	58 years
Time since dx (median)	3 years

### Primary Cancer Diagnosis

- 33% Non-metastatic breast
- 13% Metastatic breast
- 9% CLL
- 6% Prostate
- 4% Ovarian
- 4% Lung
- 3% Melanoma

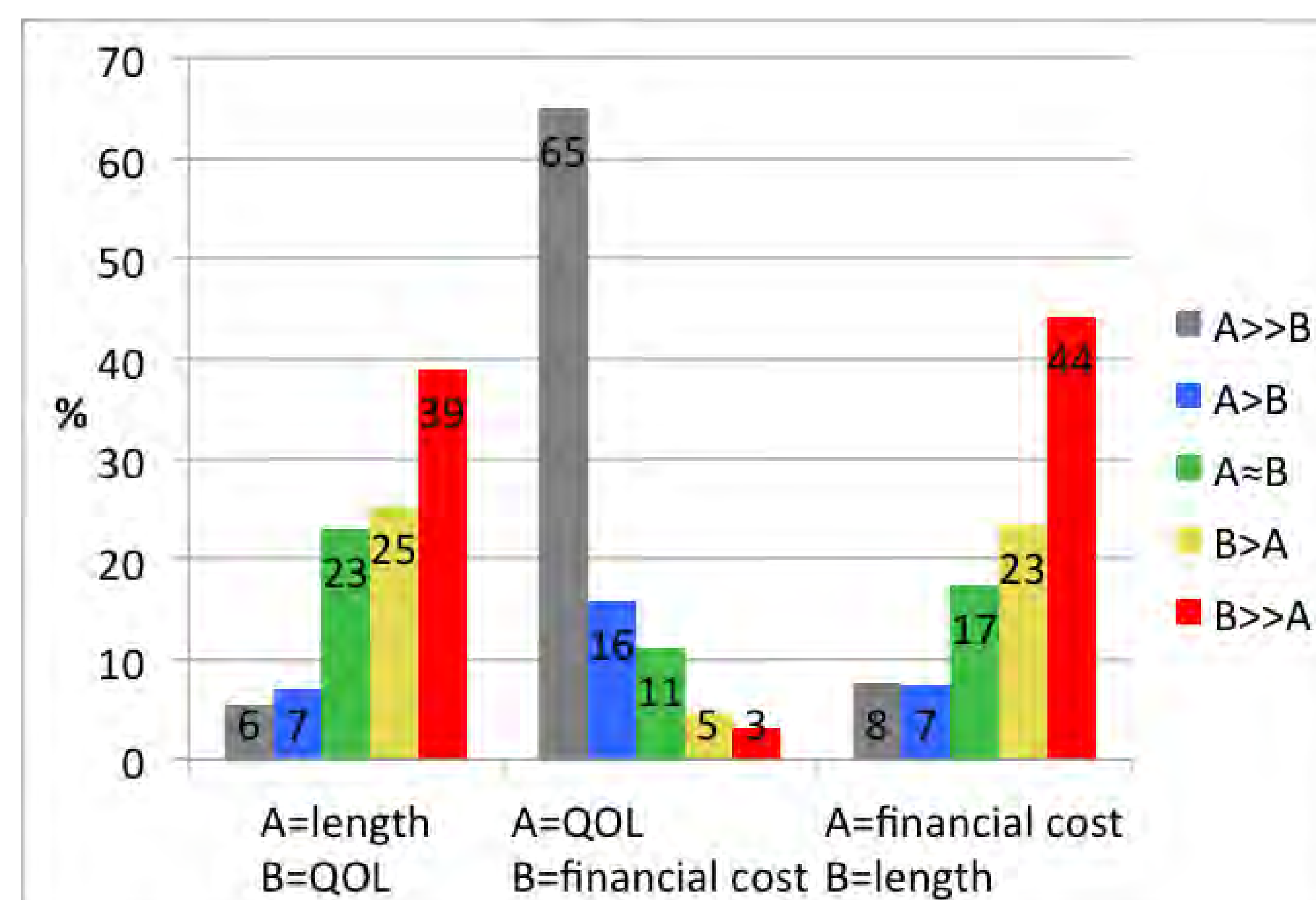
## Results

**Figure 1.** Importance of factors when making a treatment decision



The greatest proportion of registrants (76%) indicated QoL was "very much" important when deciding upon treatment followed by LoL (57%), family impact (54%), and cost (22%).

**Figure 2.** Relative impact of factors A and B when considering a treatment decision



Note: >> much more; > slightly more; ≈about equal

- 44% indicated LoL had much more of an impact on treatment decision than financial cost
- 65% indicated that QoL had much more of an impact on treatment decision than financial cost
- 39% indicated that QoL had much more of an impact on treatment decision than LoL

## Results

**Table 2.** Ranking of treatment decision making factors

"When making a treatment decision, you have to take many factors into consideration. Please rank the following in order of importance on a scale of 1 to 4, with 1=most important and 4=least important."

Factor	Mean ± SD	Median
Quality of life	1.7 ± 1.0	1
Length of life	2.2 ± 1.1	2
Impact on family	2.3 ± 1.0	2
Financial cost of care	3.0 ± 1.2	3

The mean (±SD) rank score of factors corroborated the order of importance: QoL (1.7±1.0); LoL (2.2±1.1); family impact (2.3±1.0); and cost (3.0±1.2).

## Conclusion

- We explored 3 ways to measure survivor priorities when deciding upon cancer treatment. All 3 approaches corroborated that survivors prioritize QoL as a major determining factor, even over LoL. This highlights the immediate need to fully understand QoL from the patient perspective, such as impact on family, work and physical/social/emotional functioning, and incorporate QoL-related discussions into clinical dialogue.
- The low proportion of survivors noting cost as a priority deserves further attention given growing awareness of the rising cost of care and financial toxicity for survivors and families. Health care teams may need to prompt discussions around potential financial toxicity to prevent future financial-related burden.
- Future research should explore how to develop, evaluate and implement evidence-based tools that enhance communication around QoL and cost, including which team members might be best suited for such discussions.



The Cancer Experience Registry is an online research initiative that captures the immediate and ongoing or changing social and emotional experiences of cancer survivors and their caregivers.

- The Registry is for all cancer survivors and caregivers, but also includes 11 disease-specific surveys.
- Findings contribute toward advancing research, health care and policy.
- Over 9,600 cancer survivors and caregivers are registered in the Cancer Experience Registry.

Learn more or join the Registry at [www.CancerExperienceRegistry.org](http://www.CancerExperienceRegistry.org)

References  
1. Schnipper et al (2015). American Society of Clinical Oncology Statement: A Conceptual Framework to Assess the Value of Cancer Treatment Options. Journal of Clinical Oncology. 33(23):2563-7.  
2. NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) with NCCN Evidence Blocks; available at: <https://www.nccn.org/evidenceblocks/>  
3. Longacre et al (2015). Defining Value in Oncology: Perspectives from Patients with Metastatic Breast Cancer. Association for Value Based Cancer Care 5th Annual Conference.