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Sexual function, quality of life, and cancer-related distress among prostate cancer survivors

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Background: Prostate cancer (PC) survivors experience long-term disease consequences that can affect quality of life (QoL). This study examined QoL in key areas affected by PC and its association with cancer-related distress.

Methods: Of 225 PC survivors enrolled in the Cancer Support Community's online Cancer Experience Registry, 50 completed questions about cancer-related distress, cancer history, and the Prostate Cancer-Related QoL Scales.

Results: Participant median age was 66 years; 21% had surgery, 32% underwent radiation, and 19% reported both. 31% currently and 18% previously received hormone therapy. 38% were diagnosed 5+ years ago; 26% reported recurrence, 30% reported metastatic disease. 76% reported erectile dysfunction (ED) since diagnosis. ED was more common (84%) among those who underwent surgery/radiation than those who had not (44%; $\chi^2=6.1$, $p<.05$) and among those currently (100%) or previously (88%) receiving hormone therapy than those who had not (60%; $\chi^2=9.1$, $p<.05$). 23% reported that incontinence made sexual activity/intimacy difficult. 20% "somewhat to very much" agreed they would choose a different treatment if they could redo their decision. QoL scores (mean \pm SD; scale range 0-100; higher = better QoL) were: Marital Affection (84.4 \pm 26.2); Masculine Self-Esteem (78.4 \pm 23.4); PSA Concern (77.2 \pm 21.6); Informed Decision (67.8 \pm 23.5); Urinary Control (62.1 \pm 23.6); Sexual Intimacy (59.1 \pm 34.9); Outlook (54.9 \pm 38.0); Cancer Control (49.1 \pm 31.1); and Sexual Confidence (44.1 \pm 33.7). Health Worry and Treatment Regret scores (higher = lower QoL) were 39.5 \pm 27.9 and 16.1 \pm 19.9, respectively. All QoL scales except Outlook and PSA Concern were correlated with overall cancer-related distress ($r=.43$ to $.77$; $ps<.05$), where lower QoL was associated with greater distress.

Conclusions: Some PC survivors report substantial treatment regret, and many also endorse health concerns about uncertainty and disease progression, as well as reduced sexual confidence and intimacy. Lower perceived QoL, including sexual confidence and intimacy, is associated with greater cancer-related distress among survivors. Efforts are needed to address reduced QoL in a variety of life domains among PC survivors.