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Patient perspectives of symptom burden and impact of hormone therapy (HT) in the USA and Germany

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Background

HT with androgen deprivation therapy ± androgen receptor pathway inhibitor (ARPI) is the backbone of systemic treatment for prostate cancer (PC) but is associated with adverse events that can affect quality of life. We conducted a large patient survey to gain insights into the experiences of patients with PC, including the impact of HT symptom burden on their daily lives.

Methods

Patients in the USA and Germany participated in this online survey primarily via social media adverts. The survey included questions on demographics, cancer characteristics, treatment status, symptoms associated with HT, shared decision making and support.

Results

The survey was completed by 1324 patients (median age 70 yrs, with local or locoregional disease 81.2%). Most patients (81%) had received or were receiving treatment, including surgery (53.4%), HT (51.4%), and/or radiotherapy (50.4%). Symptoms such as hot flushes, changes in body shape/weight, reduced muscle strength, and fatigue increased ≥2 fold in patients who received vs did not receive HT; hot flushes increased 10 fold (Table); among patients who received HT, fatigue, body shape/weight changes, and sleep disturbance were ≥10% more frequent with vs without ARPI treatment. Patients felt actively involved in their treatment decisions (mean score 8/median 10 on a scale of 1 [no active participation] to 10 [active participation in all decisions]) and received most information from their doctor or websites. However, for hormone therapy-related symptoms 39.4% of patients received no support from their doctors.

Conclusions

In one of the largest surveys of the lived experiences of patients with PC, HT was associated with significant symptom burden, including fatigue, body shape changes, reduced muscle strength, and sleep disturbance, which were more prevalent under ARPI therapy. Many patients who received HT and experienced hormonal symptoms did not receive adequate support from healthcare professionals.Table: 2447P

Most frequent symptoms (≥35% in HT cohorts) with >10% difference vs “Treated but never HT” cohort

Symptom, %	Ongoing HT without ARPI (n=191)	Ongoing HT with ARPI (n=209)	Treated but never HT (n=627)
Impact on sex life	77	81	50
Hot flush	66	71	7
Fatigue	63	73	34
Reduced stamina	54	57	22
Reduced muscle strength	50	57	12
Body shape/weight changes	48	60	15
Psychological distress	39	38	25
Neuropathy	35	37	14
Sleep problems	35	45	20

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Bayer.

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