Quality of Life and Late Urinary Morbidity in Patients Submitted to Prostatic Brachytherapy for Localized Prostate Cancer

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Hypothesis / Aims of Study:

Hypothesis: Brachytherapy is a valid treatment option for localized prostate cancer, frequently associated with low morbidity and good health related quality of life (HR-QoL) levels. The HR-QoL should be a health concern for doctors and patients in clinical decisions. There are few randomized studies relating the late urinary morbidity and HR-QoL in patients submitted to prostatic brachytherapy.

Aims of Study: Study the late urinary morbidity and HR-QoL in patients submitted to prostatic brachytherapy; Assess the impact of pre-treatment IPSS score in the development of urinary morbidity; Assess and characterize any urinary morbidity and HR-QoL in patients submitted to prostatic brachytherapy; Assess the impact of urinary incontinence in HR-QoL and patient global satisfaction.

Study Design, Materials and Methods:

All patients submitted to prostatic brachytherapy between October 2003 and October 2013 in Hospital de Sáo José (Lisbon) were asked to answer the EPIC, AUA-SF and ICIQ-SF questionnaires. The results were treated in function on pre-treatment IPSS score, patient’s age and time since the brachytherapy data.

Results:

- 415 patients
- 133 (32.4%) validly responded to questionnaires
- Patients age
  - Average: 71.67 years (SO: 6.48)
  - Median: 73 years
- Age at attainment of Brachytherapy
  - Average: 68.55 years (SO: 6.78)
  - Median: 60 years
- -05 years: 42 patients (31.58%)
- 05-10 years: 51 patients, (38.35%)
- 10-15 years: 53 patients (42.14%)
- >15 years: 49 patients (38.44%)
- Time since brachytherapy
  - Average: 4.32 years (SO 2.50 years)
- 1-2 years: 51 patients (38.35%)
- 2-3 years: 53 patients (42.14%)
- >3 years: 49 patients (38.44%)
- Pretreatment IPSS score:
  - IPSS score 0-1 patients (51.1%)
  - IPSS score ≥2 patients (48.87%)

Characterization of Urinary Incontinence and Its Relation with Patient Satisfaction:

ICIQ-SF score of patients with Urinary Incontinence:

Amount of urine lost due to urinary incontinence:

Interference of Urinary Incontinence post-brachytherapy in Quality of Life:

Number of pads/day:

Relationship between urinary incontinence and satisfaction of patients with brachytherapy:

Variation of EPIC score (0-100) in function of time since brachytherapy and pre-brachytherapy EPIC score:

Variation of the Urinary Summary EPIC subscores in function of time since brachytherapy and in function of pre-brachytherapy IPSS score:

Variation of "LUTS" in function of time since brachytherapy and in function of pre-brachytherapy IPSS score:

Interpretation of Results / Concluding Message:

The presence of pre-treatment LUTS does not significantly influence the development of specific LUTS but has an impact in global urinary morbidity development in patients submitted to prostatic brachytherapy. The most prevalent symptom was nocturia; Incontinence appears to be a sub estimated problem and has an important impact in patients’ satisfaction and HR-QoL; The development of late urinary morbidity is independent of patients’ age at time of brachytherapy; Brachytherapy patients satisfaction and HR-QoL are high and it is a well-accepted treatment.