ABSTRACT

ASSESSMENT OF QUALITY OF LIFE IN SURVIVORS OF CANCER CERVIX TREATED WITH RADIOTHERAPY OR CONCURRENT CHEMORADIOThERAPY – A PROSPECTIVE STUDY

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Aim: To assess the quality of life in long term survivors of cancer cervix treated with radiotherapy or concurrent chemoradiotherapy.

Objectives:

1. To assess if radiotherapy affects the quality of life among cancer cervix patients treated between 2009 - 2012 on the following dimensions:
   - Bladder dysfunction
   - Bowel dysfunction
   - Sexual dysfunction
   - Psychosocial dysfunction

2. To identify the factors associated with poor Quality of life
   - Age of the patient
Stage of the disease at presentation

Technique of radiation used.

Social factors

3. To develop interventions to improve the quality of life.

**Materials and methods:**

200 survivors of cancer cervix with no comorbid, who have completed treatment by radiotherapy or definitive chemo radiotherapy between 2009 – 2012 and who are disease free were identified and evaluated about their quality of life at present using CI QOL, EORTC C 30 and EORTC Cx 24 questionnaire followed by systemic and local examination.

**Results:**

In our analysis we found that the 200 survivors had a stage distribution of IB2-32, IIA1-15, IIA2-63, IIIB-42, IIIA-10, IIIIB-36 with an age grouping of ≤50 years =62, 51-70 years =117, >71 years =21 and radiation alone was received by 44 survivors while 156 had received concurrent chemo-radiation. We found that grade 1 bowel dysfunction was observed in 41%(82/200) and grade 2 was observed in 12% (24/200) of survivors. Increased frequency of micturition was seen in 46%(92/200), dysuria was seen in 3.5%(7/200) and hematuria in 0.5%(1/200). Symptomatic sexual dysfunction was observed in 41%(82/200), 76%
(152/200 survivors) did not have any psychosocial dysfunction. More than average QOL was seen in 69% (138/200) of cervical cancer survivors.

**Conclusion:**

In our study we found out that the QOL in cancer cervix survivors who were treated with radiotherapy or chemo radiotherapy showed a reduction in QOL with increasing stage of the survivor. QOL did not vary depending on the age of the survivor or the radiation technique (2D vs 3D). Occupied and educated women had a better QOL than housewives and those survivors who did not have any formal education. Marital status did not affect the QOL. Bowel and bladder dysfunction affected the QOL of the survivors whereas QOL was not affected by sexual or psychosocial dysfunction.

**Key words:**

Cervix, Survivors, Quality of Life.