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Determining the supportive care needs, and distress, of Australian men with prostate cancer receiving hormone therapy: A cross-sectional study.

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Introduction

The mainstay treatment for metastatic prostate cancer disease aims to reduce systemic testosterone levels, which can be achieved surgically or by chemical castration, known as androgen deprivation therapy (ADT).

Men undergoing ADT can experience a range of symptoms that can negatively affect their quality of life and can increase the need for supportive care intervention.

Aim

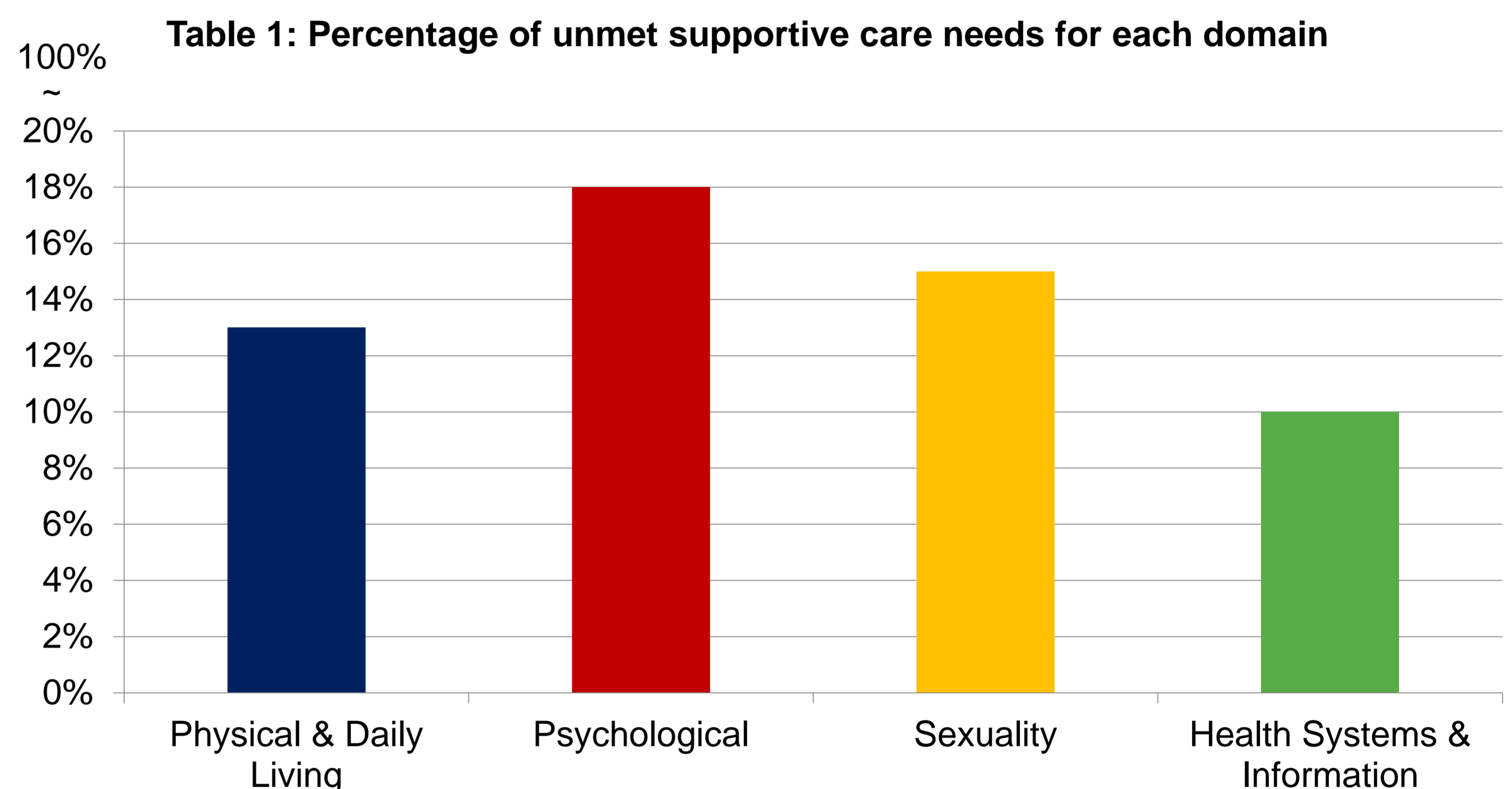
To evaluate the self-reported, unmet supportive care needs of men on hormone therapy (ADT) for prostate cancer and to determine the levels of distress experienced by these patients.

Methods

- Patients with locally advanced or metastatic prostate cancer, who are undergoing ADT as treatment for their disease, were invited to complete a series of questionnaires (The Supportive Care Needs Survey and the Distress Thermometer) completed as a single time point assessment.
- Patients were recruited from private practices and public hospital settings. A letter explaining the study was sent to the patients by their treating physician.
- This cohort was a sub-group of a larger comparison study with Scotland.

Results

A total of 62 patients (mean age = 78 years) were enrolled in the study. The average number of years since starting hormone therapy was 4.7. Both patients receiving continuous ADT and intermittent therapy were recruited. Table 1 outlines the percentage of unmet needs for each of the domains.



- Some level of distress was reported by 61% of participants, with significant levels of distress reported by 16% of participants.

Conclusions

- While most of this small cohort of Australian men receiving ADT for their prostate cancer reported low levels of unmet needs across all domains, this study highlights ongoing Physical, Psychological and Sexuality needs for some participants.
- Improved identification of patients with ongoing unmet needs and implementing strategies to better assist these patients could help improve quality of life.

References

1. NICE, *Prostate Cancer: NICE Guidance*. National Institute for Health and Care Excellence, 2014. London.
2. Paterson, C., et al., *Identifying the unmet supportive care needs of men living with and beyond prostate cancer: A systematic review*. *European Journal of Oncology Nursing*, 2015. 19(4): p. 405-418 14p.