HOW TO MEASURE & IMPROVE QUALITY OF LIFE IN CUTANEOUS T-CELL LYMPHOMA

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• How’s Health Related Quality of Life (HRQoL) impaired in CTCL?
• How do we measure HRQoL in CTCL?
• How we may improve HRQoL in CTCL?

• How should we currently best improve HRQoL?
  a) Better treatments
  b) Improved symptom control
  c) More psychological support
  d) Increased patient information
Why is quality of life Reduced in cutaneous T-cell lymphoma?

• CTCL is a visual disease

• Associated with disabling symptoms such as intractable itching (pruritus), pain, burning of skin

• CTCL is also a malignant disease of the skin with the worry of a cancer diagnosis

• Specific factors such as large or malodorous tumours, hearing loss, tiredness (malaise) and temperature dysregulation (hot/cold/shivering) may occur which are not typical of other skin diseases and may impede patients well being
Measuring QoL/HRQoL

**QoL Definition**
A state of complete physical, mental, and social well-being not merely the absence of disease

**HRQoL Definition**
Health related quality of life (HRQoL) is a subset relating only to the health domain of that existence
HRQoL: Terminology

- Health related QoL (HRQoL) –focuses on the **effects of illness and specifically treatment** on QoL

**European Organisation or Research & Treatment of Cancer (EORTC) definition of HRQoL** - the subjective perceptions of both the positive & negative aspects of cancer patients’ symptoms, including physical, emotional, social & cognitive functions & importantly, disease symptoms & side effects of treatment

- **Issues** are symptoms such as itching/pain can be measured by selecting ‘**items**’ which are questions that encompass the **issues**

- **Measures** are the HRQol questionnaires developed to test a persons’ health state by asking **items** on the relevant **issues** for their disease
CTCL HRQoL Issues

- Painful hands
- Visual loss/hearing loss
- Disfiguring
- Fungating malodorous tumours
- Pain
- Weeping, painful visual lesions
- Itching
CTCL issues affecting HRQoL

Symptoms:
- Pain
- Itch
- Fatigue
- Insomnia
- Shivering

Function:
- Able to work
- Able to use hands freely
- Able to play sport
- Able to continue hobbies
- Able to drive

Emotions:
- Frightened
- Sad
- Angry
- Lonely
- Embarrassed / ashamed

CTCL: Cutaneous T-Cell Lymphoma
HRQoL: Health-Related Quality of Life

Webinars
Cutaneous Lymphoma
EuroBloodNet Topic on Focus
How we Measure Quality of Life in CTCL; Current situation

• We combine several QOL questionnaires to cover most aspects of cutaneous lymphoma (average of 3-4 per study)

• A variety of questionnaires are used & include;
  – The Functional Assessment of Cancer Therapy– General (FACT-G)
  – EORTC QLQ-C30 questionnaires
  – EQ-5D-3L (from Euro QOL gp)
  – Skindex 29
  – 12 item MF/SS CTCL questionnaire patientslikeme®
  – Illness Perception Questionnaire (IPQ-R)
  – Pruritus Visual Analog Scale, Pruritus scale, VASitch, Pruritus related Life Quality Index (PLQI), Likert scale & Itchy QoL

• This is time consuming for the patient and combining different questionnaires makes results to interpret and compare between studies as there is no standard combination
The Skindex-29 Questionnaire consists of 10 items for Emotions, 7 items for Symptoms, and 12 items for Functioning. The scores are calculated using a Likert scale ranging from 'Never' (1 point) to 'All the time' (5 points) for emotions, from 'No effect' (0) to 'Max. Effect' (100) for symptoms. The global score is calculated by adding the scores of the three dimensions.

Data Analysis includes Descriptive Statistics and Multivariate regression. Descriptive Statistics provide variables associated with worse QoL, while Multivariate regression identifies independent factors associated with worse QoL.
Alcanza Study - QoL per changes in symptom domain by Skindex-29 questionnaire

- Patient-reported QoL assessed by Skindex-29 questionnaire showed significantly greater symptom reduction for patients receiving brentuximab vedotin versus physician’s choice (mean maximum reduction –28.08 vs –8.62; p<0.001)

![Graph showing mean change in score over cycles/day for brentuximab vedotin and physician's choice.]

Number of patients:

- Brentuximab vedotin: 56, 50, 40, 37, 36, 25, 25, 22, 47
- Physician’s choice: 45, 30, 25, 14, 13, 8, 5, 3, 37

EOT, end of treatment
Mavoric Study: Patient-reported symptom reduction as measured by the Skindex-29 scale

- The Skindex-29 Symptoms Scale scores demonstrated statistically significant improvements in favor of the mogamulizumab-treated patients vs the vorinostat-treated patients at Cycles 3, 5, and 7 (P<0.05)

- Median time to meaningful deterioration on the Skindex-29 Symptoms Scale was 27 months for mogamulizumab versus 7 months for vorinostat
Characteristics associated with significantly worse quality of life in mycosis fungoides/Sézary syndrome from the Prospective Cutaneous Lymphoma International Prognostic Index (PROCLIPI) study


1University Hospitals Birmingham, Birmingham, U.K.

To identify factors associated with poorer health-related quality of life (HRQoL) in patients newly diagnosed with MF/SS

Methods:
• Patients enrolled into Prospective Cutaneous Lymphoma International Prognostic Index (PROCLIP!1) had their HRQoL assessed using the Skindex-29 questionnaire & scores were analysed in relation to patient- and disease-specific characteristics.

Results:
The study population consisted of 237 patients [3:2 male:female; median age 60 years, 179 early MF and 58 d advanced MF/SS
• In univariate analysis HRQoL was worse,
  1. Female gender
  2. Alopecia
  3. Sezary syndrome
  4. Late-stage MF
  5. Elevated blood serum LDH
  6. High skin mSWAT count
  7. Confluent erythema
• In multivariate analysis only female gender (p=0.003) and alopecia (p=0.02) were independent predictors of worse global HRQoL
## PROCLIPI: HRQoL Update

<table>
<thead>
<tr>
<th>Total Number of Skindex-29 measures</th>
<th>1595</th>
</tr>
</thead>
<tbody>
<tr>
<td>No. Individuals</td>
<td>814</td>
</tr>
<tr>
<td>Age (Median, IQR)</td>
<td>60 (47 – 70) years</td>
</tr>
<tr>
<td>Sex</td>
<td>Males (519); Female (295) - Ratio 1.75</td>
</tr>
<tr>
<td>EORTC Classification</td>
<td>Classical MF 614 (75.4%)</td>
</tr>
<tr>
<td></td>
<td>Folliculotropic MF 108 (13.3%)</td>
</tr>
<tr>
<td></td>
<td>Sezary Syndrome 88 (10.8%)</td>
</tr>
<tr>
<td></td>
<td>Pagetoid Reticulosis 6 (0.7%)</td>
</tr>
</tbody>
</table>
PROCLIP: HRQoL Update

Change in Skinex-29 Scores Over Time

![Graphs showing change in Skinex-29 scores over time for Symptoms, Emotions, and Functioning.](image)

- **Symptoms**: P=0.001
- **Emotions**: P=0.0001
- **Functioning**: P=0.043
PROCLIP: HRQoL Update

Change in Skindex-29 Scores Over Time

HRQoL improves from Visit 1 to Visit 2

What’s important?

Global

Itch?

Pain?

Worry?

Sleep?

Visits:

1 2 3 4 5

Measures:

1 2 3 4 5

No.

569 300 234 167 97

P=0.0001

European Reference Network for rare or low prevalence complex diseases

Cutaneous Lymphoma

Webinars

Topic on Focus

Patients’ Organisations
**PROCLIPi: HRQoL Update**

**What are the individual responses telling us?**

<table>
<thead>
<tr>
<th>Statement</th>
<th>NEVER</th>
<th>RARELY</th>
<th>SOMETHES</th>
<th>OFTEN</th>
<th>ALL THE TIME</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. My skin hurts</td>
<td>1</td>
<td>2</td>
<td>3</td>
<td>4</td>
<td>5</td>
</tr>
</tbody>
</table>

Which items on the Skindex-29 questionnaire are respondents rating at “Often” or “All the Time”?
**PROCLIPR: HRQoL Update**

### Ranking of the Top 15 Items Scored “Often” or “All the time”

1. I worry that my skin condition may get worse
2. I worry that my skin condition may be serious
3. My skin itches
4. My skin is sensitive
5. My skin is irritated
6. I am annoyed by my skin condition
7. I am frustrated by my skin condition
8. My skin condition affects how well I sleep
9. I am angry about my skin condition
10. I am embarrassed by my skin condition
11. My skin condition burns or stings
12. My skin condition makes me feel depressed
13. My skin condition makes me tired
14. I am ashamed of my skin condition
15. I worry about side-effects from skin medications / treatments

### Learning Points

- Emotional items are ranked as the top 2
- Skin symptoms are important: *itching*, *sensitivity*, *irritated*
- Emotions: *Annoyance, Frustration, Anger, embarrassment*
PROPOSAL

DEVELOP A SKIN LYMPHOMA SPECIFIC QOL QUESTIONNAIRE JOINT EORTC CLTF & EORTC QOL GROUP

**Leads:** Simone Oerlemans, Julia Scarisbrick,
**Co-Investigators:** Constanze Jonak, Antonio Cozzio, Ulrike Wehkemp & Pietro Quaglino

Grant awarded by EORTC 2019
EORTC/CTLF QOL Questionnaire specific for Cutaneous Lymphoma

For all skin lymphoma, cover low grade B-cell, early stage MF, advanced MF/SS and aggressive B-cell

- CTCL other than MF and CBCL may only have more minor HRQoL issues and must be Qs to reflect all stages

Questionnaire has to (be):

✓ Not time consuming
✓ Easy to understand and to complete
✓ Specific for the disease
✓ Consider age and gender differences
✓ Validated
✓ Translation into national languages
How can we currently improve HRQoL?

- Able to work
- Able to use hands freely
- Able to play sport
- Able to continue hobbies
- Able to drive

Symptoms:
- Pain
- Itch
- Fatigue
- Insomnia
- Shivering

Function:
- Embarrassed / ashamed
- Angry
- Lonely
- Sad
- Frightened

Emotions:
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- Sad
- Frightened
Supportive Care to improve HRQoL
A holistic approach to treatment aiming to improve HRQoL should include symptom, emotional and functional support

• Pruritus treatment for itching
  ° Moisturisers
  ° Antihistamines, doxepin
  ° Gabapentin
  ° Aprepitant, Mirtrazapine
  ° Naltrexone

• Skin infections treatment
  ° Anti-bacterial agents
  ° Anti-viral agents
  ° Bleach baths

• Pain relief
  ° Paracetamol / Codeine
  ° Morphine

• Insomnia help with sleeping
  ° Counselling
  ° Sleeping tablets

• Functional support
  ° Dressings
  ° Pain Relief
  ° Physiotherapy

• Psychological support
  ° Cancer psychologist
  ° Patient help groups
  ° Antidepressants
Discussion
Questions
Correct answer question
Health Related Quality of life (HRQOL) in CTCL is entirely related to symptom burden
True / False
Answer – false also includes emotions and functions

Opinion questions
Which of the following do you believe to be more important factor in improving HRQOL in CTCL patients in the future?
  a) Improving survival
  b) Better treatment responses
  c) Improved symptom relief

How should we currently best improve HRQOL?
  a) Offer psychological support
  b) Improve patient information
  c) Offer more symptomatic treatment alongside anti CTCL therapy