Impact of cancer on the quality of life of Tunisian pediatric patients

F. Letaief-Ksentini1, T. Doria1, S. Masmoudi2, K. Meddeb2, A. Mokani2, Y. Yahyaoui2, A. Galton1, M. Ayadi2, N. Chraiet1, H. Raess1, A. Mezlini3
1Medicine, Institut Salah Azaiez, Tunis, Tunisia, 2Medical Oncology, Institut Salah Azaiez Institute of Cancer, Tunis, Tunisia, 3Medical Oncology, Institut Salah Azaiez, Tunis, Tunisia

Background: The PedsQL (Pediatric Quality of Life Inventory) is an instrument which measures health-related quality of life (HRQL) in children and young adults. The PedsQL 4.0 Generic Core Scales (GCS) are child self-report and parent proxy-report scales developed to be integrated with the PedsQL disease specific modules. The PedsQL 3.0 Cancer Module (CM) was designed to measure pediatric cancer specific HRQL.

The aim of this study was to evaluate the impact of their disease and its treatments on their physical, mental and social health.

Methods: This prospective study included 26 patients newly diagnosed and relapsed, on-treatment, from the pediatric ward of Salah Azaiez Institute. Their ages were 5 to 25 years-old. The 23-item PedsQL 4.0 GCS encompass 4 scales: physical, emotional, social, and school functioning. The cancer module scales has 27 items which encompasses 8 scales: pain and hurt, nausea, procedural anxiety, treatment anxiety, worry, cognitive problems, perceived physical appearance and communication. The format instructions, response scale and scoring method are identical for GCS and CM. The scores are between (0-100). We translated the English version of the GCS and the CM into arabic.

Results: All the children completed their self-report. The mean age was 15.5 years-old. 53.8% were boys. 27.07% of patients had brain tumors, 19.2% osteosarcoma, 19.2% Ewing sarcoma and 11.5% Undifferentiated nasopharyngeal cancer (UCNT). Twenty patients were newly diagnosed. Eight cases had metastatic disease. The child total GCS mean was 60.86 physical score mean 64.06 and social score mean 67.5. For the child total CM score mean, it was 61.53 ; pain score mean 75, nausea score mean 50 which is the lowest and the worry score mean 62.49 . We found that the nausea score is higher for children with intensive chemotherapy (p value=0.026). The parent proxy total GCS mean was lower than the child s score 58.69 as well as the total CM parent score mean which was 61.17. We didn’t find significant difference between the age of the patient, staging of his disease and the pedsQL scores.

Conclusions: The HRQL of children is adversely affected as a result of the uncontrolled symptoms from cancer treatment. In Tunisia, we should work more to improve the pediatric HRQL.

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