THE USE OF PATIENT-REPORTED OUTCOME INSTRUMENTS IN IMMUNE CHECKPOINT INHIBITOR THERAPY FOR CANCER IN CLINICAL PRACTICE: A SYSTEMATIC REVIEW

M. ESPINOSA BOSCH, B. MORA RODRÍGUEZ, R. TAMAYO BERMEJO, I. MUÑOZ CASTILLO.
REGIONAL UNIVERSITY HOSPITAL OF MÁLAGA, PHARMACY, MÁLAGA, SPAIN.

Background
ICI have shown significant clinical benefit for patients diagnosed with varied types of cancer. With an increasing use of these therapies, it is of urgent interest to achieve a comprehensive understanding of the overall patient experience and to confirm if the results of PROs in clinical ICI trials are reflected in clinical practice.

Objective
To identify and categorize PRO instruments and examine related utility and measurement issues in studies reporting on ICI.

Material and methods

Literature was searched using PubMed and Embase (October 2021)
Search terms included controlled vocabulary and specific keywords related to: (1) ICI, (2) PRO, and (3) Oncology
Two reviewers independently screened titles/abstracts followed by a full text selection based on predefined criteria.
We included qualitative and quantitative studies in clinical practice.

Results

Excluded articles
- 112 drug or procedure different from ICI
- 68 clinical trials
- 32 review/editorial articles
- 11 different language

Articles to be included
- n=14

Articles for title/abstract screening
- Pubmed n=235

Median number of patients: 67 (range 6-412)
10 single centre
4 multicentre

7 melanoma
2 lung cancer
1 genitourinary cancer
4 various
7 undergoing treatment
7 long-term survivors

6 cross-sectional survey
4 prospective observational studies
2 case-control studies
1 randomized controlled pilot trial
1 qualitative study

The most frequent questionnaire used were cancer specific: 6 EORTC-QLQ-C30, 2 FACT-G, although the variability between the studies was very important, with 16 different scales identified, of which 9 were evaluated in a single study

Conclusion
Cancer-specific or generic QoL questionnaires are the most widely used PRO measures in clinical practice ICI studies. As ICI therapies exhibit unique characteristics different from conventional cancer therapies, such broad instruments may not capture the specific ICI-related symptoms, toxicities, and impact on the patient’s QoL. Hence, the adaptation or development of ICI specific PRO tools should be further investigated.