

# QUALITY OF LIFE IN PATIENTS WITH KIDNEY CANCER IN SLOVAKIA

Mastiliakova D<sup>1</sup>, Bielik J<sup>1</sup>, Tuzincinova K<sup>1</sup>, Bystricky B<sup>2</sup>, Melus V<sup>1</sup>, Kliment J<sup>3</sup> Sokol, R<sup>4</sup>

<sup>1</sup>Faculty of Health, Alexander Dubcek University in Trencin, Slovakia

<sup>2</sup>Faculty Hospital, Trencin, Slovakia

<sup>3</sup>University Hospital, Martin, Slovakia

<sup>4</sup>Urology outpatient department, Trencin, Slovakia

## OBJECTIVES

The standardized incidence of kidney cancer (KC) in Slovakia was 14,6/100 000 in men and 7,0/100 000 in women and has growing trend. There were diagnosed more than 800 new cases in 2013 of KC in Slovakia. The objective of this paper was to find out the level of QoL in patients with KC in Slovakia.

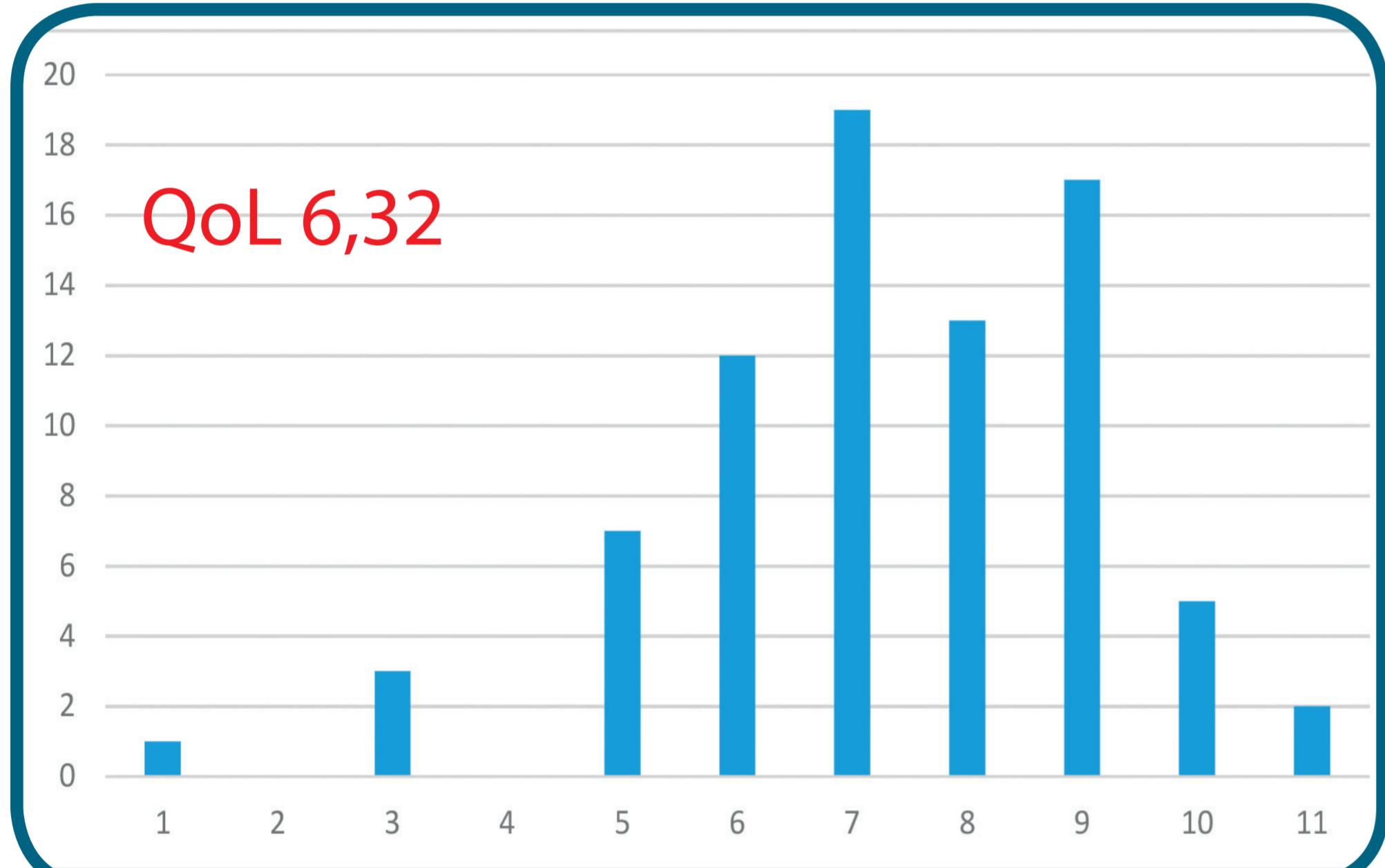
## METHODS

The primary method used for the analysis of QoL was the combined questionnaire consisting of 6 parts: A. Demography (9 items), B. Clinical part (B1+B2, 17 items), C. Quality of life with dominant numeric scale (13 items), D. Socio-economic part (9 items), E. EQ-5D (5 items), F. Symptoms of disease (9 items). There were 79 patients in the examined group from the 110 asked to fill the questionnaire. All patients were treated by surgery.

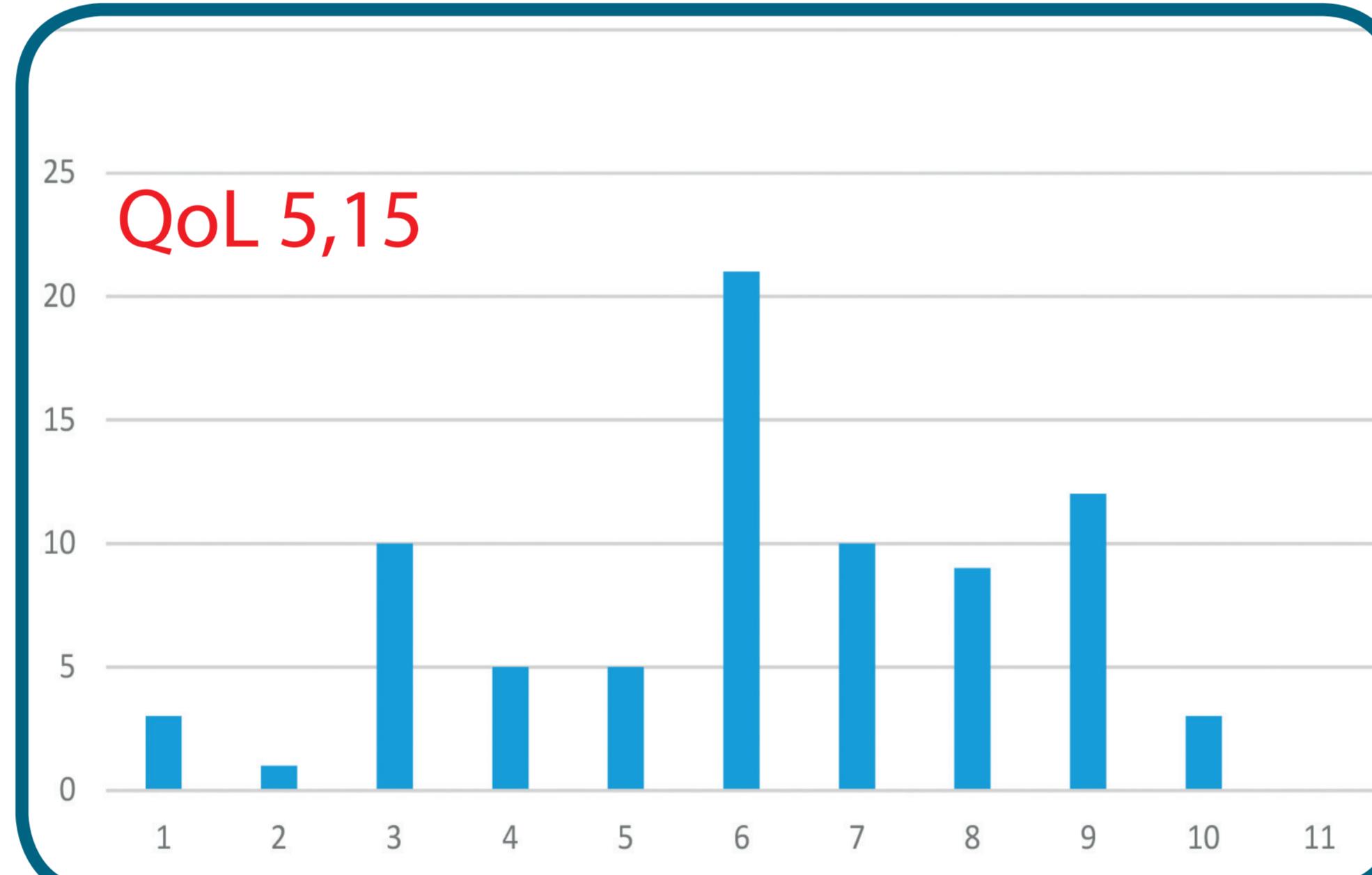
## RESULTS

Present level of QoL was identified as 6,32 on the scale from 0 to 10 (0 - the worst, 10 - the best), while in the time of the KC diagnosis it was 5,15. QoL was 7,86 in the time without BC and 8,82 in the total optimal state of health. Comparative to the QoL was examined the ability to work (AW), too. Present level of AW was identified as 6,02, while in the time of the BC diagnosis it was 5,44. AW was 8,25 in the time without KC and 9,06 in the total optimal state of health. The impact of treatment on QoL was 6,34 and the disease had impact 5,94 on family QoL. The average income was 456 € and the willingness to pay for 1 month was in average 270 € per months to be complete healthy.

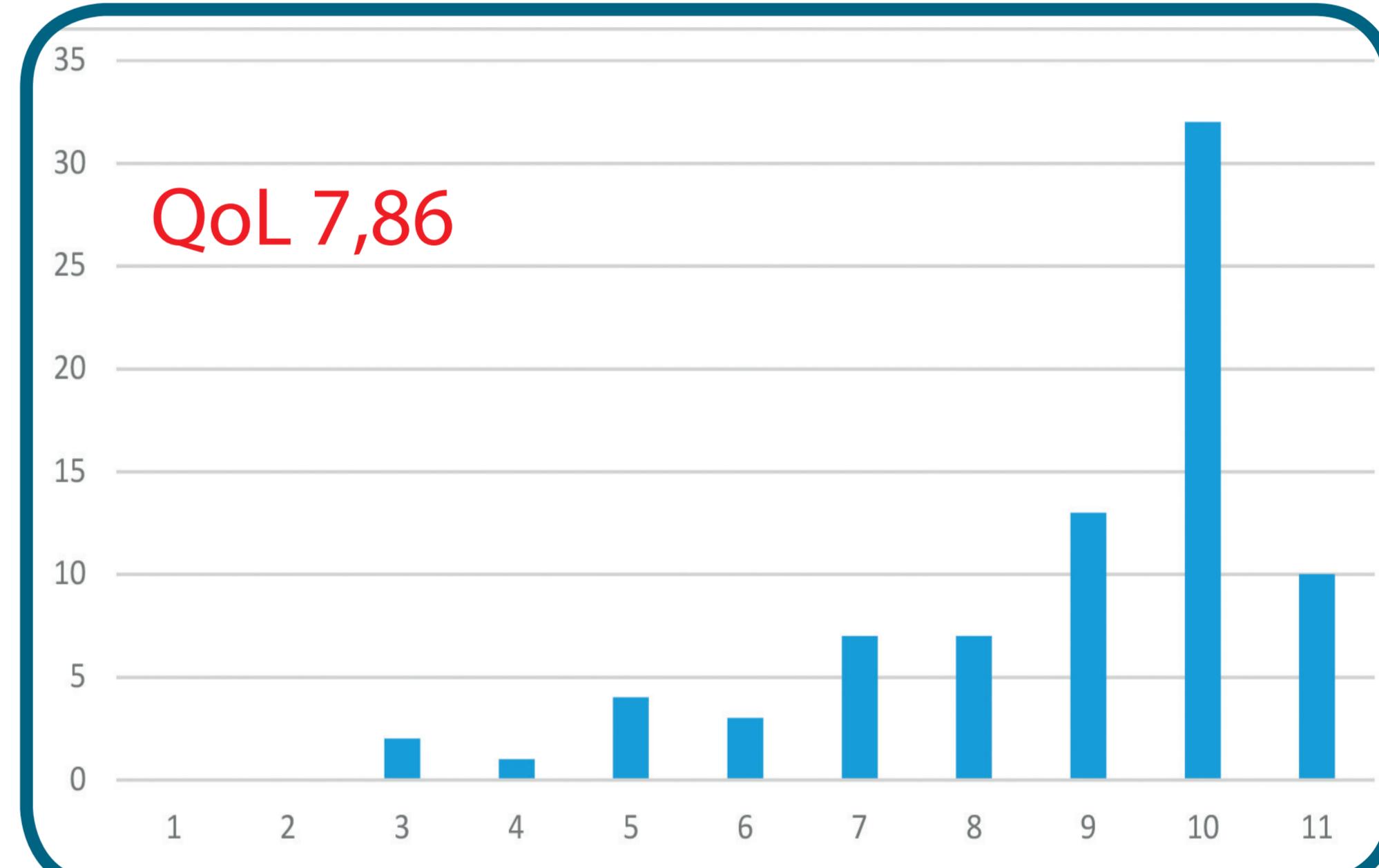
**Figure 1** Current QoL



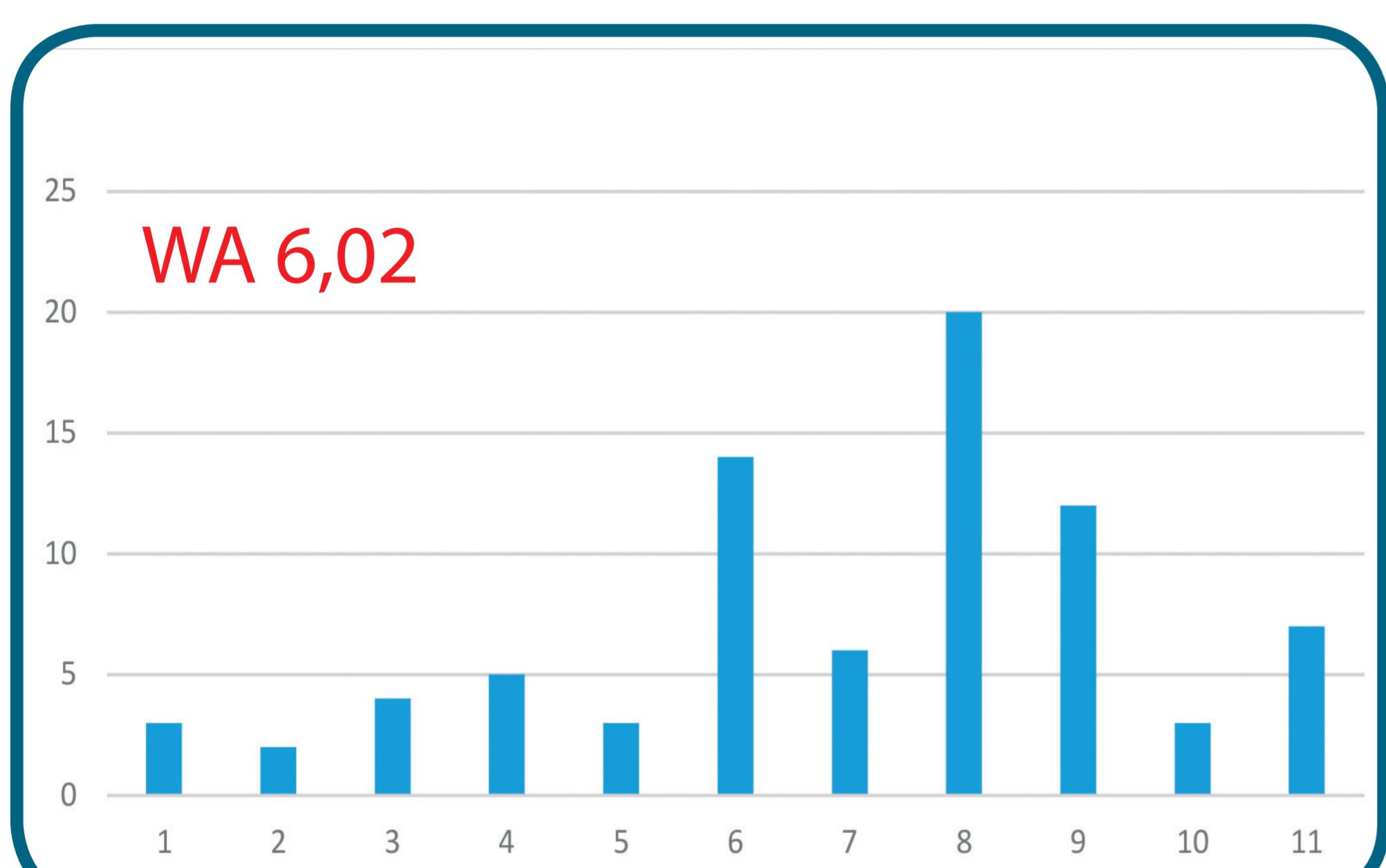
**Figure 2** QoL in the time of diagnosis



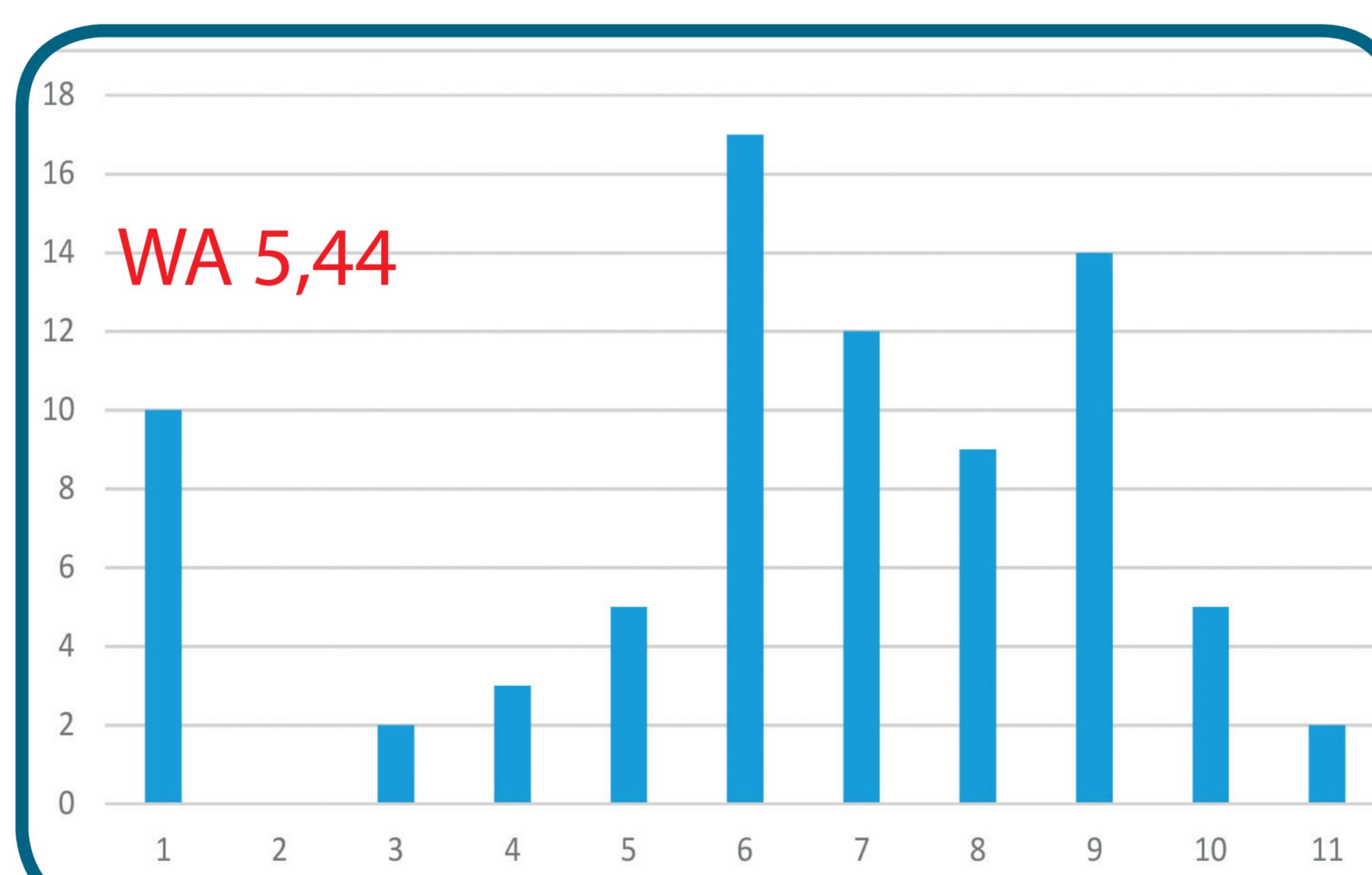
**Figure 3** QoL in the time without the disease



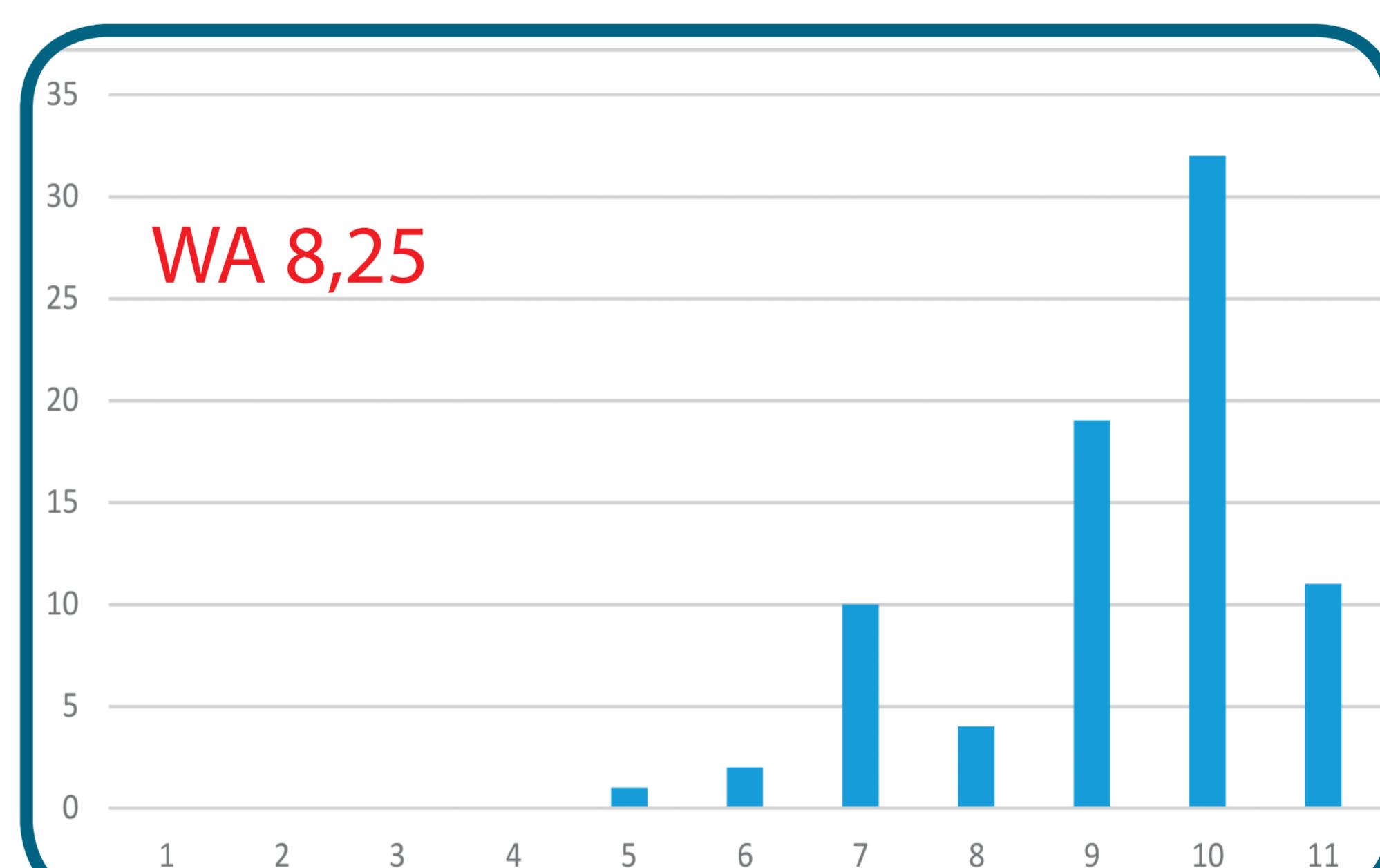
**Figure 4** Current work ability



**Figure 5** Work ability in the time of diagnosis



**Figure 6** Work ability in the time without the disease



## CONCLUSION

The disease had a significant impact on patients's QoL nad patient's family QoL, too. The treatment of kidney cancer had a significant impact on increasing QoL and work ability of patients.

## REFERENCES

- CELLA, D. – BUSHMAKIN, A.G. – CAPPELLERI, J.C. – CHARBONNEAU, C. – MICHAELSON, M.D. – MOTZER, R.J. 2012. Baseline quality of life as a prognostic survival tool in patients receiving sunitinib for metastatic renal cell carcinoma. [online]. United Kingdom: Nature Publishing Group on behalf of Cancer Research UK, 2012. 646-650 p. [cit. 2012 01.12.] <http://www.nature.com/bjc/journal/v106/n4/full/bjc2011589a.html>. ISSN: 1532-1827  
KOLOMBO, I. - HANUŠ, T. – ODRÁŽKA, K. a kol. Karcinom ledviny. 1. vyd. Praha : Mladá fronta a.s., 2010. 279 s. ISBN 978-80-204-2344-3

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Correspondence: jan.bielik@tnuni.sk

