

1780P Clinical and psychometric validation of the BreSAS questionnaire for symptom assessment among breast cancer survivors

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Background: Today a large number of breast cancer (BC) patients survive many years post diagnosis. The large number of women surviving many years post BC diagnosis has heightened interest in studying long-term effects of cancer on quality of life. A number of cancer-specific health-related quality of life (QoL) measures have been developed but these measures may not be appropriate for use with long-term survivors. With this study we want to evaluate the reliability, clinical and psychometric validity of the BreSAS Questionnaire (BQ) among BC survivors.

Methods: The BQ is a quick, simple 10 items module for the assessment of long-term physical, psychological, sexual and cognitive effects that may influence quality of life (pain, anxiety, depression, fatigue, irritability, quality of sleep, impaired concentration, hot flashes, vaginal itching, other). The total BreSAS score ranks from 0-100, with a low score indicating a better QoL. Patients were not stratified into predetermined clinically distinct groups. QoL data were collected alongside standard outcomes in patients undergoing treatment for BC. Patients complete the BQ, the FACT-ES questionnaire, case report forms for clinical and socio-demographic data at different time points during follow up visits. Reliability, and clinical and psychometric validity of the questionnaires are assessed by correlation analyses, exploration of known group comparisons, and responsiveness to clinical changes.

Results: From September 2015 to February 2016, 149 patients from three Italian oncology units were enrolled. Baseline questionnaires were returned from all and the majority of patients (n = 134 - 89%) completed the BQ and FACT-ES in less than 15 min. For reliability, Cronbach's alpha coefficients for each scale were greater than 0.70 in all analyzed symptoms. Convergent validity of BQ showed by Pearson's r demonstrated a high correlation between intensity of symptoms and QoL, especially for pain and depression. No data were provided about reproducibility with test-retest study.

Conclusions: The BQ demonstrates sufficient validity and reliability to support its use to assess patient-reported outcomes and symptom assessment during planned follow-up clinical visits among BC survivors.

Legal entity responsible for the study: Giampiero Porzio.

Funding: Has not received any funding.

Disclosure: All authors have declared no conflicts of interest.