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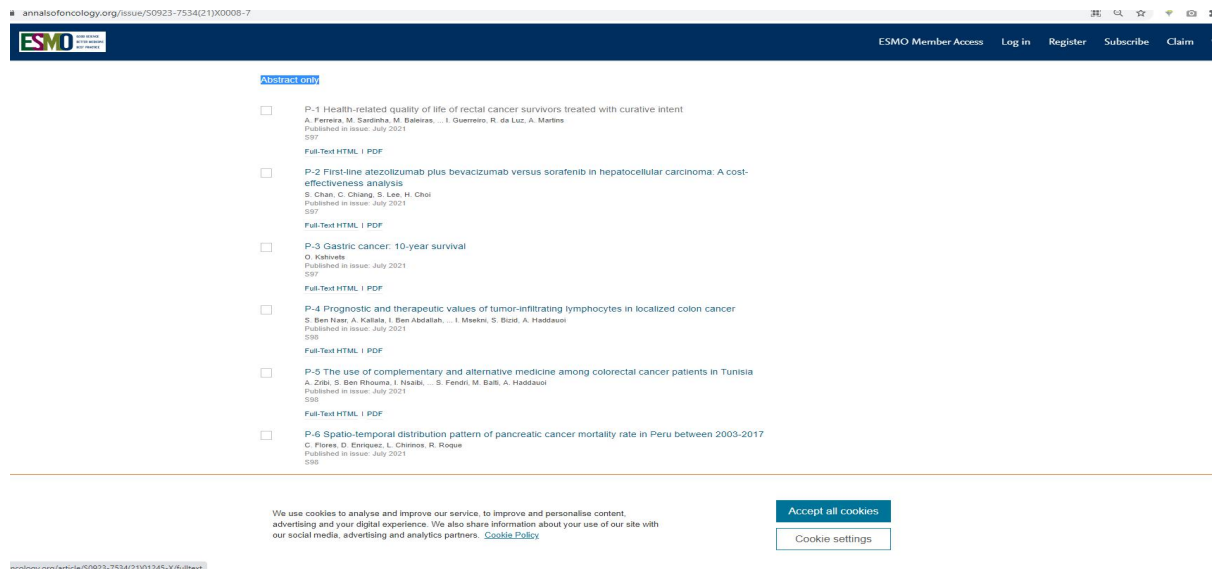
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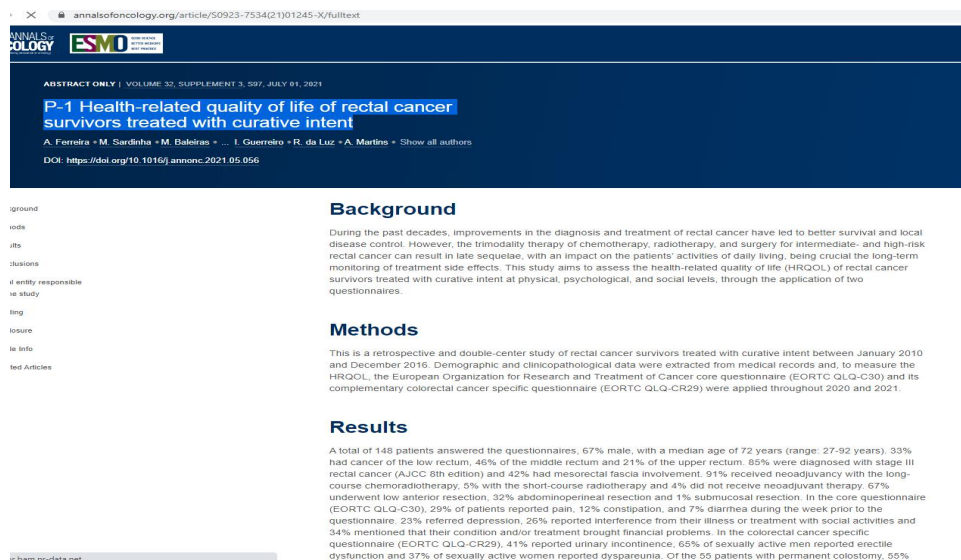
- ☐ P-1 Health-related quality of life of rectal cancer survivors treated with curative intent
A. Ferreira, M. Sardinha, M. Baloiras, ... I. Guemiro, R. da Luz, A. Martins
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ABSTRACT ONLY | VOLUME 32, SUPPLEMENT 3, 597, JULY 01, 2021

P-1 Health-related quality of life of rectal cancer survivors treated with curative intent

A. Ferreira • M. Sardinha • M. Baloiras • ... I. Guemiro • R. da Luz • A. Martins • Show all authors

DOI: <https://doi.org/10.1016/j.annonc.2021.05.066>

Background

During the past decades, improvements in the diagnosis and treatment of rectal cancer have led to better survival and local disease control. However, the trimodality therapy of chemotherapy, radiotherapy, and surgery for intermediate- and high-risk rectal cancer can result in late sequelae, with an impact on the patients' activities of daily living, being crucial the long-term monitoring of treatment side effects. This study aims to assess the health-related quality of life (HRQOL) of rectal cancer survivors treated with curative intent at physical, psychological, and social levels, through the application of two questionnaires.

Methods


This is a retrospective and double-center study of rectal cancer survivors treated with curative intent between January 2010 and December 2016. Demographic and clinicopathological data were extracted from medical records and, to measure the HRQOL, the European Organization for Research and Treatment of Cancer core questionnaire (EORTC QLQ-C30) and its complementary colorectal cancer specific questionnaire (EORTC QLQ-CR29) were applied throughout 2020 and 2021.

Results

A total of 148 patients answered the questionnaires, 67% male, with a median age of 72 years (range: 27-92 years). 33% had cancer of the low rectum, 46% of the middle rectum and 21% of the upper rectum. 85% were diagnosed with stage III rectal cancer (AJCC 8th edition) and 42% had mesorectal fascia involvement. 91% received neoadjuvancy with the long-course chemoradiotherapy, 5% with the short-course radiotherapy and 4% did not receive neoadjuvant therapy. 67% underwent low anterior resection, 32% abdominoperineal resection and 1% submucosal resection. In the core questionnaire (EORTC QLQ-C30), 29% of patients reported pain, 12% constipation, and 7% diarrhea during the week prior to the questionnaire. 23% referred depression, 26% reported interference from their illness or treatment with social activities and 34% mentioned that their condition and/or treatment brought financial problems. In the colorectal cancer specific questionnaire (EORTC QLQ-CR29), 41% reported urinary incontinence, 65% of sexually active men reported erectile dysfunction and 37% of sexually active women reported dyspareunia. Of the 55 patients with permanent colostomy, 55%

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A. Ferreira, J. A. Martins, L. M. Luz + A. Martins • Show all authors

DOI: [https://doi.org/10.1093/annonc/mdz397.0000001](#)

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P-1 Health-related quality of life of rectal cancer survivors treated with curative intent

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● Title

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DB01 DATA BLITZ: MINI PRESENTATIONS

DB01-01 INTRINSIC DIFFERENCES OF ANIMAL AND HUMAN SPINAL CORD STEM/PROGENITOR RESPONSES TO INFLAMMATORY AND REGENERATIVE FACTORS

Ahmad Galuta, **Abdul Mounnem Kassab**, Diana Ghinda, Ryan Sandarage, Jason Kwan, Eve Tsai

University of Ottawa, Neurosurgery, Ottawa, Canada

Background: While the use of neural stem/progenitor cells (NSPCs) has been reported as a promising therapeutic approach for spinal cord injury repair, the direct comparison of adult primary animal spinal cord NSPCs have not been directly compared to human NSPCs under the same culture conditions to characterize intrinsic differences between human and animal NSPC response to inflammatory and regenerative factors.

Objective: To improve the clinical translation of animal-based NSPC therapies to humans, we assessed the effect of inflammatory and regenerative factors on primary spinal cord NSPCs in a small (rat) and large (pig) animal model in comparison to NSPCs from humans.

Methods: To mimic post-injury inflammation, primary-derived NSPCs from adult humans (n=8), pigs (n=5), and rats (n=6) were treated with pro-inflammatory factors interleukin-6 (IL-6), tumor necrosis factor- α (TNF α), or transforming growth factor- β (TGF β). To direct regeneration, NSPCs were treated with retinoic acid (RA), platelet-derived growth factor (PDGF α).

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Data Blitz Oral Presentations

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