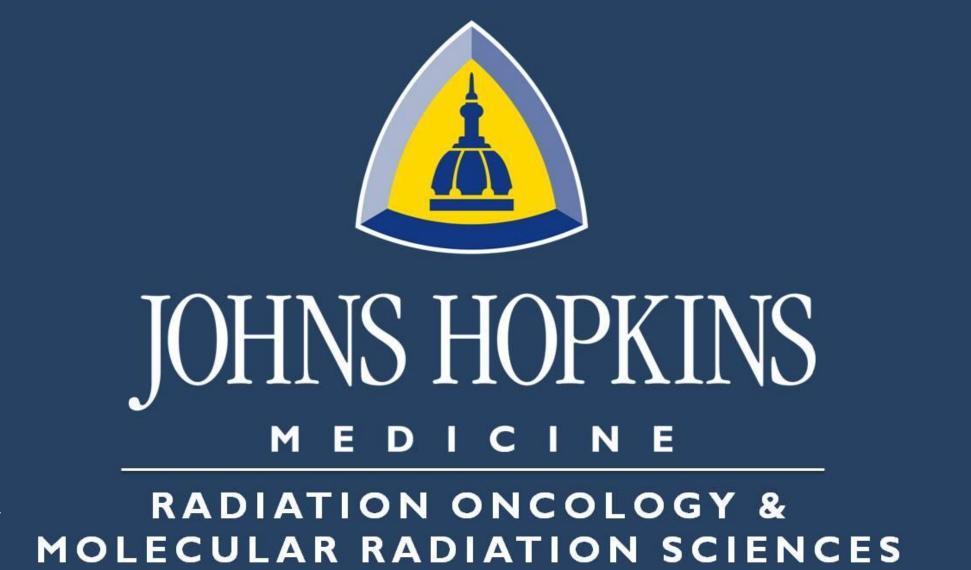
# Correlations of FACT with MDADI, and SSQ Toxicity Questionnaires in a Prospective Cohort of Head and Neck Cancer Patients

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## Purpose/Objectives

- Patient-reported outcomes (PRO's) are vital tools for comparing treatment deintensification efforts in HPV+ Head and Neck cancer (HNC)
- A variety of PRO's are utilized in practice, including the MD Anderson Dysphagia Inventory (MDADI), the Sydney Swallow Questionnaire (SSQ), and the Functional Assessment of Cancer Therapy (FACT) which comprises a suite of several distinct but partially overlapping measures
- We sought to describe correlations between these PROs and to explore the potential benefits of utilizing multiple PRO's for a single cohort

#### Materials/Methods

- HNC patients concurrently completed MDADI, SSQ,, and FACT instruments at all radiation oncology clinic visits from 2015 to 2016.
- Spearman correlation coefficients were calculated between the FACT instruments and MDADI or SSQ.
- Unsupervised K-means cluster analyses were performed for each comparison to identify groups of patients for which the PROs trended similarly. Clusters were visualized using CLUSPLOT.
- Principal component analysis (PCA) identified the degree of variability explained by each PRO

#### Table 1: Correlations of FACT, SSQ, MDADI

	SSQ	MDADI
FACT-General	-0.404	0.548
FACT-HN	-0.547	0.681
FACT-HNSI	-0.625	0.715
FACT-HN Subscale	-0.699	0.776

N=631; All correlations significant, p<0.001

Fig 1: CLUSPLOT of MDADI, SSQ, and FACT-HN Subscale Showing 3 Distinct Clusters

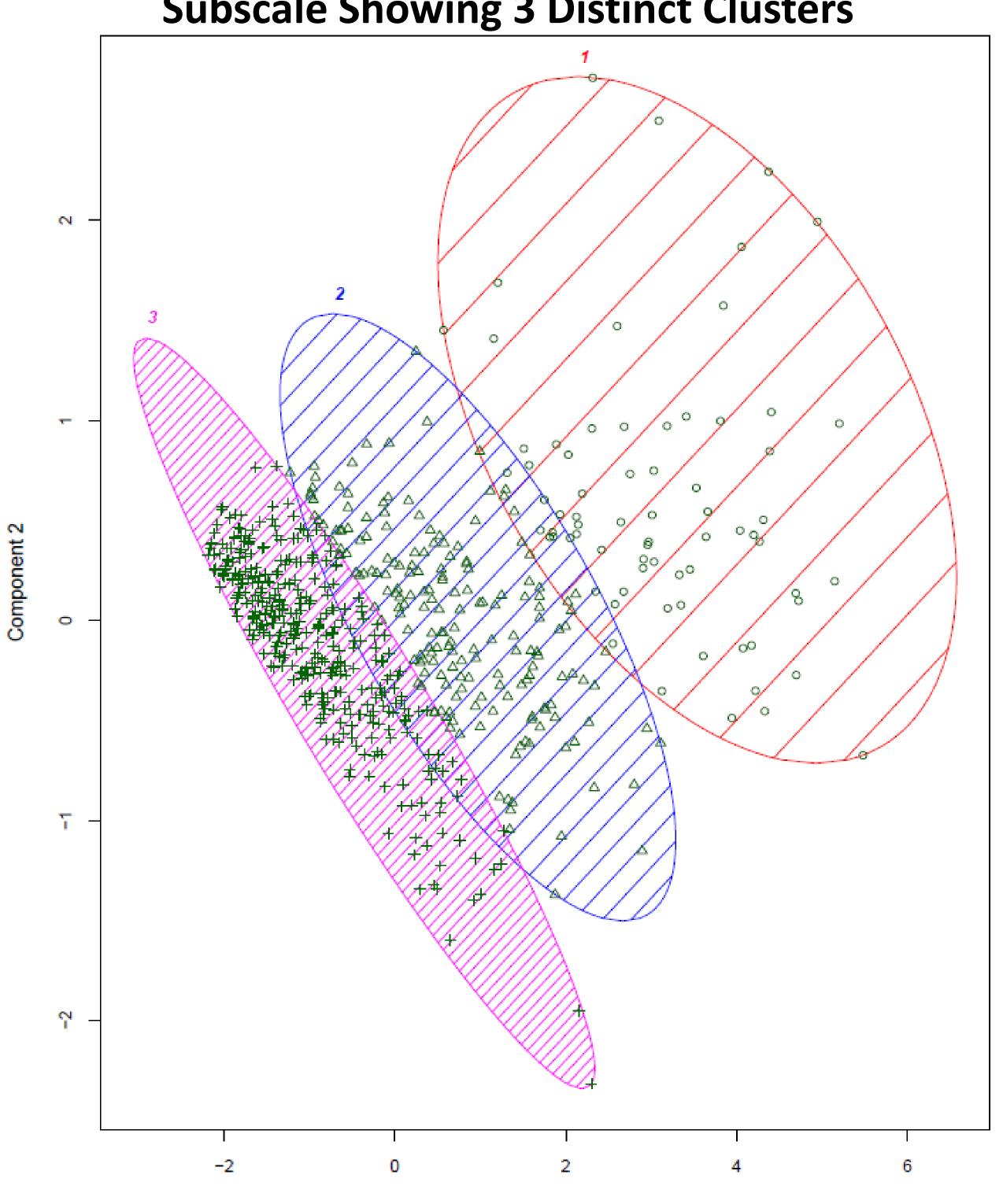
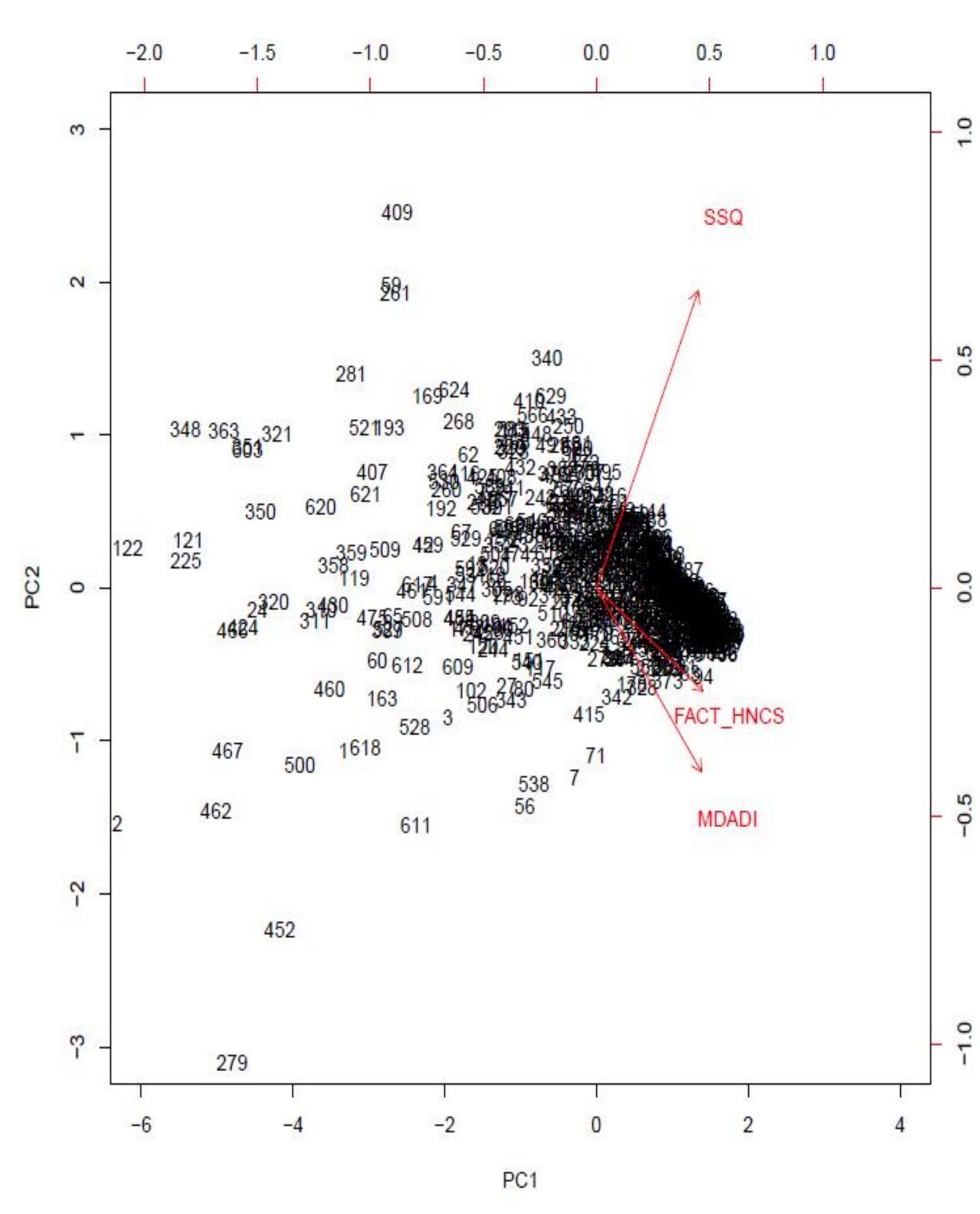


Table 2: Number of Clusters Identified (k-means)

	SSQ	MDADI	SSQ and MDADI
FACT-General	3	2	3
FACT-HN	3	3	3
FACT-HNSI	3	3	3
FACT-HN Subscale	3	3	3

Fig 2: Variability Explained by MDADI, SSQ, and FACT-HN Subscale on PCA



### Conclusions

• The HN-subscale and FACT-HNSI strongly correlate with other established PROs, and may be the measures most readily interpretable when FACT is used in clinical trials.

Results

- Cluster analysis consistently stratifies patients into high, medium, and low toxicity subgroups.
- The MDADI and FACT instruments appear to measure and explain variability quite similarly, and their concurrent administration may not provide additional useful information.
- Including a functional dysphagia metric like SSQ along with a QoL-focused PRO such as FACT or MDADI may provide finer resolution in measurements of patient toxicity experiences