

(NESP, darbepoetin alfa) – a novel erythropoiesis stimulating protein – has been developed, which has a 2- to 3-fold greater serum half-life than recombinant human erythropoietin (rHuEPO). The aim of this analysis was to investigate the relationship between NESP-associated Hgb changes and HRQOL in patients with solid tumours receiving chemotherapy.

Methods: Data from 2 clinical trials (conducted in Canada, USA, Australia, and Europe) involving subjects receiving NESP, rHuEPO or placebo for 12 weeks, were combined (n = 517) to examine the relationship between Hgb and HRQOL. Patients completed the FACT-An questionnaire, containing the fatigue, anaemia symptoms, functional, physical, emotional and social/family well-being scales, at baseline and end of treatment.

Results: Patients' fatigue improved by end of treatment by 4.0 points when Hgb increased by ≥ 2 g/dL. Patients' physical, functional, and emotional well-being, and anaemia symptoms improved with Hgb increases. Social/family support results did not show a relationship with Hgb change. There was a correlation between change in fatigue score and Hgb changes ($r = 0.19$, $p = 0.002$) and ECOG performance scales ($r = -0.24$, $p < 0.001$). Variation in baseline and change from baseline in fatigue scores by age, geographic region, and gender were observed.

Scale Score	Haemoglobin Change (d/dL)								
	<0			0-2			≥ 2		
	Δ	95%CI	n	Δ	95%CI	n	Δ	95%CI	n
Fatigue	-1.5	(-3.4-0.4)	143	1.6	(0.2-3.0)	220	4.0	(2.1-5.9)	154
Physical	-0.3	(-1.2-0.5)	143	0.9	(0.2-1.5)	219	1.6	(0.7-2.5)	152
Functional	-0.9	(-1.7-0.0)	143	0.8	(0.2-1.5)	219	1.0	(0.2-1.9)	154
Emotional	0.4	(-0.3-1.1)	140	0.9	(0.4-1.4)	219	1.2	(0.6-1.9)	153
Social/family	-0.4	(-1.0-0.3)	141	-0.4	(-1.0-0.0)	216	-0.8	(-1.5-0.0)	152
Anaemia symptoms	-0.8	(-1.7-0.0)	143	0.7	(0.2-1.2)	220	0.8	(0.1-1.3)	152

Conclusion: Hgb improvement has the greatest impact on patient-reported fatigue levels, with moderate impact on physical and functional well-being. Patients' HRQOL tends to decline if Hgb levels are not increased. The magnitude of patients' response to Hgb may vary by demographic char-

acteristics. Therefore, the results show that cancer patients may benefit from NESP therapy, since it appears, to have a positive effect on their quality of life.

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POSTER

Symptomatic treatment improve quality of life of patients with lung cancer

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Purpose: Evaluation of the role of symptomatic treatment in improvement of main symptoms (hemoptysis, cough and pain) of advanced lung cancer.

Method: 20 patients with advanced lung cancer were included in this study. The characteristics of the patients were: 54 years mean age, 15 males and 5 women, all of them received chemotherapy, stage IIIB -13, stage IV -7, performance status was ≥ 2 after ECOG scale. The symptomatic treatment was: Etamsylate 250 mg x 3/day and Carbozochrome 1.5 mg x 3/day; for cough and pain the patients received Mabron 50 mg x 4/day and Paracetamol 500 mg x 4/day. The symptoms assessment was performed by a 4 levels scale.

Results: 5 patients out of the group of 20 presented hemoptysis; 4 of them were moderate and one was very important that led to death. The other 4 improved after treatment (80%). All patients presented cough: 5 rare, 10 frequent and 5 very frequent. 8 patients (55%) with easy and medium cough significantly improved after treatment. Pain was present in 10 cases: 2 with heavy pain - level 4 on the 4-level scale, 6 with medium pain -level 2 and 2 with easy pains - level 1. A significant improvement was present in easy and moderate pains (80%). Toxicity induced dizziness, asthenia and nausea in 5 cases but it didn't led to stop the treatment.

Conclusions: Quality of life was significantly improved by symptomatic treatment. Combination Mabron + Paracetamol was active in cases presenting cough and also in cases presenting medium pain. Toxicity is worthless.