A Longitudinal Examination of the Impact of Treatment Modality on Relationship Satisfaction and Mental Health Quality of Life Outcomes among Prostate Cancer Survivors

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Abstract: A review of the literature reveals a need for longitudinal studies to properly understand the quality of life of prostate cancer survivors during their prostate cancer journey in order to identify opportunities for patient support and care during prostate cancer survivorship. In this study, mental health and relationship satisfaction were assessed longitudinally and by treatment modality among a population-based sample of Canadian adult men with a history of prostate cancer diagnosis. A total of 98 men, aged 51 or older with a history of prostate cancer completed an on-line 15-minute survey between May 2017 and February 2018, assessing mental health (Kessler Psychological Distress Scale) and relationship satisfaction (Dyadic Adjustment Scale) at baseline and at three months post-treatment with either active or nonactive prostate cancer treatment. Almost 1 in 6 men in this sample screened positive for mental health issues (17.34%, n=17) irrespective of treatment modality and most (n=11) were not currently on medication for depression, anxiety or both. Mental health outcomes were poorer for men with multimorbidity. For every instance of screening positive for mental health issues, 2.021 (95% CI:1.1 to 3.8) times more comorbidities were recorded. Relationship satisfaction and dyadic cohesion were statistically significantly lower from first assessment to 3 months for men who underwent multiple treatment modalities (surgery and radiation with hormonal therapy). Relationship satisfaction was also lower at 3 months for men who underwent radiation therapy. Almost 1 in 2 men in this sample (74%) indicated they did not attend a prostate cancer support group. Results suggest that treatment for mental health is underutilized in men with prostate cancer. Men who undergo multiple forms of active treatment appear more vulnerable to relationship dissatisfaction and feeling disconnected from their partner. Data points to important opportunities for patient education and care support during survivorship.

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