Feasibility of routinely administering the EQ-5D health utility instrument to cancer patients


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Objectives: To better inform policy decisions, collecting health utility information from cancer patients regularly through routine administration of the EQ-5D instrument would be beneficial. Currently, cancer patients in Ontario routinely complete symptom assessment surveys. We sought to assess their willingness to also complete the EQ-5D.

Approach: 618 adult cancer survivors across all non-CNS solid and hematologic cancer sites at the Princess Margaret Cancer Centre completed a survey of socio-demographic questions, the EQ-5D instrument, and a series of questions regarding willingness to complete/burden associated with completing the EQ-5D. Results were analyzed using descriptive statistics and multivariate logistic regression.

Results: The mean (SD) health utility score was 0.81 (0.15). Amongst those surveyed, 88% reported that the EQ-5D was easy to complete, 92% took less than 5 minutes, 89% were satisfied with its length and 86% were satisfied with the types of questions asked. Importantly, 92% reported that they would complete the EQ-5D, even if it were used solely for research purposes and 73% agreed with the notion of completing it regularly at their clinic visits (not more than once per month). Patients with lower EQ-5D scores (p=0.0006), non-Caucasians (p=0.0024; 60% willing), and those that do not speak English at home (p=0.02; 53% willing) were less willing. In our model, age, gender, socioeconomic status, curability of tumor, disease site and performance status did not affect willingness.

Conclusion: Routine collection of EQ-5D in the cancer clinic is feasible, but a potential bias is the underrepresentation of ethnic minorities and patients with lower EQ-5D scores.