

Quickshot Presentation 6

Decision Regret and Quality of Life in Caregivers of Patients with Appendiceal Cancer Undergoing Hyperthermic Intraperitoneal Chemotherapy

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Introduction: A recent study demonstrated that patients with appendiceal cancer (AC) undergoing hyperthermic intraperitoneal chemotherapy (HIPEC) had low overall levels of regret regarding their procedure. However, those who expressed regret had worse quality of life (QOL) and higher rates of surgical complications. The aim of this study was to assess the correlation between decision regret and QOL in caregivers of patients with AC who underwent HIPEC.

Methods: An anonymous, IRB-exempt survey was administered to caregivers through a collaboration with the Appendix Cancer and Pseudomyxoma Peritonei Research Foundation. Caregivers with completed demographic information and the Zarit-Burden Interview (ZBI-12) were included in the analysis. The Decision Regret Scale (DRS) was employed to measure levels of regret, PROMIS-29 v 2.0 for QOL, and the FACT-COST to assess financial toxicity.

Results: Forty caregivers met inclusion criteria. As overall DRS scores were very low (mean [SD] 6.0 [5.6], regret was

analyzed as a continuous variable. Most respondents were spouses (n=22, 55.0%), followed by children (n=9, 22.5%), 97.5% were non-Hispanic White, with 52.5% being male and 77.5% being married. Regarding income, 35% of caregivers reported < \$74,062 annually, and 60% traveled more than 50 miles for the patient to undergo HIPEC. No patient demographic, tumor or surgical outcomes were related to caregiver regret, other than if the patient did not receive a complete cytoreduction (DRS 10 vs. 4 for complete; p=0.002). Financial toxicity did not correlate with regret (mean [SD] FACT-COST 25.9 [11.4]; p=0.221). Regret was significantly associated with worse QOL in all categories (Spearman correlation coefficients all greater than 0.49 in absolute value, maximum of 0.76, all p<0.01), as well as increased caregiver burden (mean ZBI-12 16.3 ± 8.8; p=0.042, qualifying as moderate burden). Caregivers reported being frequently stressed (55.0%), with some reporting losing control of their life because of their relative's illness (30%).

Conclusions: Caregivers of patients with AC had overall very low levels of decision regret regarding their loved one's HIPEC procedure. Higher caregiver burden and worse QOL were strongly correlated with regret. Future studies will explore opportunities to improve support and resources for caregivers of patients undergoing HIPEC, both perioperatively and in the long-term.