





PATIENTS REPORTED OUTCOMES (PRO) IN BREAST CONSERVING TREATMENT

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BACKGROUND

Early breast cancer patients have a high survival. It is very important to focus how treatments impact in their quality of life.

OBJETIVE: to determinate whether the type of radiotherapy technique after breast conserving therapy has an impact on patient-reported satisfaction and quality of life, as well as provide reliable and valid evidence regarding patient outcomes.

MATERIAL AND METHODS

- **-169 patients** with early breast cancer treated with **conservative treatment** between 2017-2019.
- -Breast-Q questionnaire® (postoperative conservative therapy module) was provided to patients 6 months after the end of the radiotherapy.
- -We compared two different radiotherapy techniques, **acelerated partial breast irradiation (APBI) with <u>brachytherapy</u> in one 18 Gy fraction and <u>external beam</u> radiotherapy** (EBRT), hypofractionated in 15 fractions plus a boost of 3 fractions. -We used the **W Wilcoxon signed-rank** test to compare the patient satisfaction.

RESULTS

- 84%: EBRT vs 16% APBI
- 70%: selective sentinel node biopsy, 18%: lymphadenectomy and 12% no axillary treatment.
- 24,9% of patients treated with EBRT received axillar plus infrasupraclavicular nodes.
- We only found statistically significant differences in the radiation adverse events, with a median of 78 (EBRT) versus 89 (APBI), p 0.027.

CONCLUSIONS

Patients treated with APBI with brachytherapy had higher levels of satisfaction with the treated breast than those who received external beam radiotherapy.

All patients eligible for APBI should be considered to be treated with brachytherapy.