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## **Quality of life of men diagnosed with prostate cancer**

**[This study compares the quality of life of men receiving radiation therapies for prostate cancer with the quality of life of men receiving surgical treatment]**

Two types of radiation therapies, radioactive seed implantation and high dose of radiation, are replacing surgical treatment, radical prostatectomy, for prostate cancer. The aims of this study are to compare Quality Of Life (QOL) outcomes of patients with PCa who receive one of three treatments. Intensity Modulated Radiation Therapy (IMRT) is a new delivery technology in radiation oncology that targets radiation more precisely to the tumor while sparing more of the surrounding normal tissues. No literature was located comparing QOL outcomes of patients receiving IMRT and radical prostatectomy. Most of the previous research studies of quality of life of men with prostate cancer focused on symptoms of treatments such as urinary, bowel, and sexual dysfunction. Results of previous research with cancer patients suggested that psychological coping factors are more important to patients' quality of life than the symptoms associated with treatment. Educational theory suggests that people are interested in information that has the potential to improve their well being, understand their immediate problem, and anticipate their future.

One hundred sixty-two patients receiving radiation therapy or prostatectomy for Prostate Cancer (PCa) will be studied. Patients will be treated with either (1)IMRT plus radioactive seed implantation (group 1; n=54); (2) IMRT plus high dose radiation (group 2; n=54); or (3)radical prostatectomy (group 3; n=54). Data collection will take place on three occasions. The current study is collecting data at the time the patients enter the study and before they are given the treatment. The proposed study will enable data collection to continue on occasion 2 (6months after initial treatment), and occasion 3 (12 months after initial treatment). Data collection will be conducted by phone and data will be entered directly into the computer program. Statistical tests will be performed to look for differences between the groups on their quality of life, symptoms, stress, mood distress, anxiety, coping, and their confidence in being able to do something to manage (self-efficacy) the treatments and their side effects. Results of the proposed study will provide knowledge of symptoms and the psychological factors shown to influence patients' quality of life. The rationale for the study is that by identifying physical and psychological reactions of patients and educational programs may be designed to improve patients' QOL.