# P067 Health-related quality of life among men receiving treatment for metastatic castration-resistant prostate cancer: Results from an international real-world study

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**Introduction & Objectives:** Several studies have reported on real-world treatment patterns and outcomes in metastatic castration-resistant prostate cancer (mCRPC). However, little is known about health-related quality of life (HRQoL). This study examined patient HRQoL by treatment line in men with mCRPC in Europe (France, Germany, Spain, Italy, the UK), and the US.

**Materials & Methods:** Physicians in Europe and the US were recruited to abstract data from medical records for the next 4 men with mCRPC between January and August 2020. Male patients were then invited to complete a one-time patient-reported survey, which included the European Quality of Life 5-Domain 5-Level Scale (EQ-5D-5L) questionnaire. Mean (standard deviation [SD]) EQ-5D utility score, and EQ visual analogue scale (VAS) scores are reported by line of therapy (1$^{st}$ line [1L], 2$^{nd}$ line or more [2L+]). Higher values represent better outcomes. Data were analyzed descriptively.

**Results:** This analysis included 312 men with mCRPC (Europe, n=278; US, n=34). Median (range) age was 71 (45–90) years; 12% of men had a family history of prostate cancer; 84% had bone metastases; 26% had visceral disease. At the time of data collection, 90% (n=280/312) of men were receiving 1L treatment and 10% were receiving 2L+ treatment (n=32/312). Common 1L mCRPC treatment overall included novel hormonal therapy (NHT; 61%; n=191/312) and taxane chemotherapy (22%; n=68/312); NHT + taxane was used in 5% of men (15/312). Amongst 2L+ patients, common 2L treatment included NHT (47%; n=15/32) and taxane chemotherapy (53%; n=17/32). Mean EQ-5D utility scores, and EQ-VAS scores were better among men receiving 1L than 2L+ mCRPC treatment (Table 1).

Table 1. Mean EQ-5D scores by line of therapy among men receiving treatment for mCRPC

| Mean (SD) | 1L (n=280) | 2L+ (n=32) |
|---|---|---|
| EQ-5D-5L* | 0.78 (0.22) | 0.71 (0.32) |
| EQ-VAS | 64.2 (18.2) | 59.9 (22.9) |

*A German scoring tariff was chosen for the EQ-5D-5L utility score, as Germany provided the largest proportion of patient-reported data.

**Conclusions:** In this study of men receiving treatment for mCRPC, worse HRQoL was observed among men receiving 2L+ treatment vs. 1L treatment. This suggests that treatment options that maximally delay disease progression while maintaining HRQoL should be prioritized, as this may delay deterioration in HRQoL.