

## P093 Quality of life and metabolic profile of metastatic prostate cancer patients stratified according to castration status: An analysis from a tertiary cancer centre from India

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**Introduction & Objectives:** Androgen deprivation therapy (ADT) adversely impacts the quality of life (QoL) of patients with metastatic prostate cancer (mPC), in terms of fatigue, loss of energy and emotional distress. Metabolic changes include abnormal body composition (increased body mass index, increased fat mass, reduced lean body mass and reduced muscle strength). However, it is not known whether castration sensitive or resistant status impacts the metabolic parameters, and if there is a difference in quality of life across the two groups.

**Materials & Methods:** This analysis is part of a cross sectional study of metabolic profile and quality of life being conducted at the genitourinary cancer clinic at the All India Institute of Medical Sciences, New Delhi. Patient reported outcome (PRO) data of patients of mPC  $\geq$  18 years of age was collected through the FACT P questionnaire. Baseline demographic and clinical data was summarized using descriptive statistics.

**Results:** A total of 78 patients were included in the analysis, of whom 40 had castrate sensitive and 38 had castrate resistant mPC. We stratified our data into castrate sensitive versus resistant and we found no difference in the QoL sub score of Physical well being, emotional well being, social well being and functional well being as well as the FACT G score and TOI scoring. Metabolic parameters also did not indicate any difference between the two groups. (Table 1)

Table 1 QoL and metabolic profile of castrate versus non-castrate metastatic carcinoma patients

Variable	Castrate Sensitive (N=40) Mean $\pm$ SD	Castrate Resistant (N=38) Mean $\pm$ SD	P=
Age	64.2 $\pm$ 10.1	63.9 $\pm$ 8.3	0.5
FACT P score			
Physical Well Being	20.16 $\pm$ 5.6	20.15 $\pm$ 5.6	0.5
Social Well Being	23.51 $\pm$ 3.6	25.4 $\pm$ 2.78	0.1

Emotional Well Being	18.53±4.7	18.68±4.3	0.5
Functional Well Being	9.3±6.1	9.23±5.4	0.5
FACT Prostate Cancer Subscale	31.6±7.28	30.3±7.32	0.7
FACT P TS	103.11±13.65	103.87±12.6	0.6
FACT G TS	71.5±9.7	73.4±8.01	0.8
BMI (m/kg <sup>2</sup> )	24.5± 4.09	24.7 ± 4.06	0.5
MUAC (in)	22.6± 10.38	26.8 ± 14.5	0.9
Waist circumference (in)	67.05± 30.97	73.37 ±31.3	0.8
Hip circumference (in)	69.04±30.3	73.9±31.2	0.7
Body Fat %			
Visceral fat	12.75±6.36	13.01±6.13	0.5
Skeletal mass	26.4± 2.3	25.4±2.7	0.04
Subcutaneous fat	27.6±5.4	30.9±6.52	0.1

**Conclusions:** We did not find any difference in the metabolic profile and QOL between castration sensitive and resistant patients. Though limited by small sample size, the study suggests that most of the metabolic derangement and impact on QOL occurs in the initial treatment with ADT and early intervention is warranted in such patients.