

Abstract Form

<p>Abstract author/s</p>	<p>1. Dr Eva Battaglini, Prince of Wales Clinical School, University of New South Wales</p> <p>2. Prof David Goldstein, Prince of Wales Clinical School, University of New South Wales and Department of Medical Oncology, Prince of Wales Hospital</p> <p>3. Dr Susanna Park, Brain and Mind Centre, University of Sydney and Prince of Wales Clinical School, University of New South Wales</p>
<p>Presenting author</p>	<p>Dr Eva Battaglini, Prince of Wales Clinical School, University of New South Wales</p>
<p>Organisation</p>	<p>Prince of Wales Clinical School, University of New South Wales</p>

Title of abstract: Investigating the impact of chemotherapy induced peripheral neuropathy in cancer survivors

Authors: Dr Eva Battaglini, Prof David Goldstein and Dr Susanna Park

Background: Chemotherapy-induced peripheral neuropathy (CIPN) is a major but poorly understood side effect of cancer treatment, producing tingling, numbness and pain. CIPN can lead to cessation of effective treatment, long-term functional disability and reduced quality of life, yet at present there is little understanding of its impact

Aims: The aim of the study was to investigate the impact of neurotoxic chemotherapy side effects on the lives of Australian cancer survivors.

Method: An anonymous online survey platform was used to collect data covering demographics, cancer diagnosis, cancer treatment, CIPN and other side effects of

chemotherapy, including standardised measures of general health, quality of life, physical activity, pain and neuropathic symptoms.

Results: Data was analysed from 1028 respondents who were treated with neurotoxic therapies (83% female, 16% male), mean age 59 years (*SD* 10.74, range 21 - 89 years). A majority of respondents were treated for breast cancer (59%), with 13% treated for colorectal cancer, 11% myeloma and 4% ovarian cancer. Chemotherapy types received included paclitaxel (30%), docetaxel (32%), oxaliplatin (12%), thalidomide (8%), bortezomib (8%) and cisplatin (5%).

The majority of respondents (78%) reported experiencing neuropathic symptoms after completing chemotherapy, with 75% reporting current symptoms. Patients completed their cancer treatment an average of 3.7 years ago, and 30% of those who have experienced CIPN reported no improvement in symptoms since completing treatment. In respondents with current CIPN, functional impacts were reported, with 29% reporting moderate or severe difficulties with walking, and 23% reporting moderate or severe difficulties with hand function. Respondents who reported current CIPN symptoms scored lower on a quality of life measure than those without current symptoms. Respondents with current CIPN symptoms who reported meeting Australian physical activity guidelines also reported lower levels of CIPN symptoms and better quality of life than those who reported that they did not meet recommended activity levels.

Implications that impact on your project: These findings suggest that CIPN has a lasting impact on cancer survivors, supporting further work to improve assessment, prevention and treatment.