

CAPTURING HEALTH-RELATED QUALITY OF LIFE (HRQL) OF DIFFERENTIATED THYROID CANCER (DTC) PATIENTS REFRACTORY TO RADIO-IODINE (RAI) TREATMENT: A QUALITATIVE EVALUATION OF THE VALIDITY OF PUBLISHED DTC HEALTH UTILITIES AND GENERIC HEALTH UTILITY MEASURES (SF--6D and EQ-5D)

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Background/Purpose: Generic preference-based questionnaires such as the EQ-5D and SF-6D may be used to quantify the effects of disease on HRQL. These output values, known as utilities, facilitate comparisons across diseases and disease states in health economic evaluation of treatments. Some utilities for DTC have been published, but not for RAI-refractory DTC. This study aimed to evaluate the validity of published DTC utilities and generic health utility measures for economic evaluation of treatments for RAI-refractory DTC.

Methods: A conceptual model with 50 main concepts of HRQL impact was developed based on qualitative research conducted with 52 DTC patients representing 4 treatment phases, including RAI-refractory DTC. HRQL impact was greatest for advanced DTC (recurring/persistent or RAI-refractory). Content of the 50 concepts was mapped to EQ-5D and SF-6D domains/items.

Results: Of the 50 main concepts, 25 and 27 mapped directly onto domains/items in the EQ-5D and SF-6D, respectively. Concepts not mapped were mostly symptoms rather than broader HRQL impacts. EQ-5D offered better coverage of certain impact through its “Pain/Discomfort” domain, while the SF-6D “Physical Functioning” and “Mental Health” domains offered better coverage of other types of DTC HRQL impact.

Discussion & Conclusion: Overall, SF-6D covered a broader range of the impacts of DTC on emotional/physical problems on daily and social activities than did EQ-5D. Findings of this qualitative evaluation suggest that published DTC utilities lack validity for RAI-refractory DTC and that SF-6D may be the more sensitive utility questionnaire for capturing HRQL impact of RAI-refractory DTC.

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