



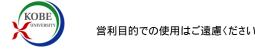
EORTC-JCOG Quality of Life workshop in Japan

A Challenge of Joining the EORTC QOLG from Japan

Kobe University Hospital Cancer Center Naomi Kiyota, MD, PhD



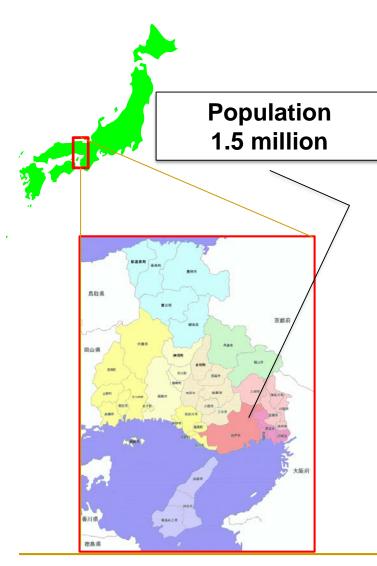
- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions



- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions



Kobe City, Hyogo, Japan

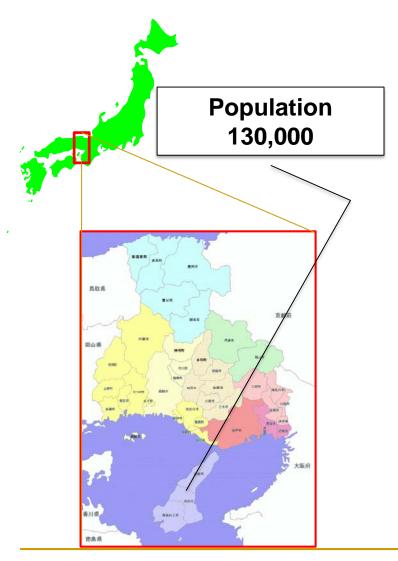








Awaji island, Hyogo, Japan







Kobe University Hospital



- □ Founded in 1869
- □ 920 beds
- 37 clinical divisions



Kobe University Hospital Department of Oncology/Hematology



- Clinical activity of our department
 - In patient: 40 beds, 15,000 pts/year
 - Out patient treatment unit: 28 beds, 11,000 pts/year

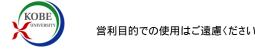


JCOG Head and Neck Cancer Study Group

- Group Chair: Ryuichi Hayashi (Head and Neck Surgeon)
- Group Coordinator: Naomi Kiyota (Medical Oncologist)
- Established in 2011
- 31 institutions in Japan participate
- Ongoing trials
 - JCOG1008: post operative CRT for high-risk HNSC
 - JCOG1212: super selective iaCRT for maxillary sinus cancer
 - JCOG1601: prophylactic ND for early tongue cancer



- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions

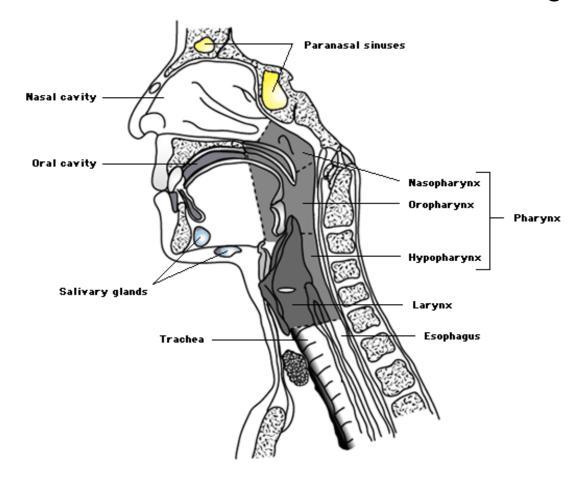


- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions



Head and Neck Cancer

Affects fundamental functions of human being





Incidence of HNC by Primary Sites

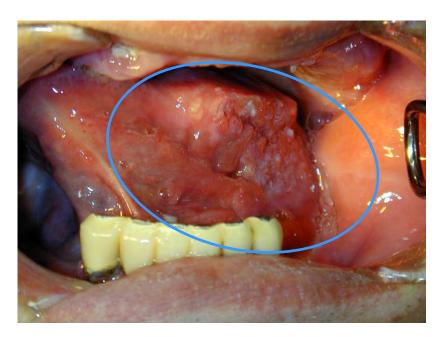
- Head and Neck Cancer Registry of Japan (2003 and 2013)
 - Proportion of oral cavity is decreasing
 - Proportion of oropharynx is increasing

Primary	2003	2013
Oral cavity	59.1 %	29.5 %
Larynx	15.7 %	20.4 %
Hyopharynx	9.6 %	19.8 %
Oropharynx	8.4 %	14.7 %
Nasopaharynx	2.2 %	3.2 %
Paranasal sinus	5.1 %	7.0 %

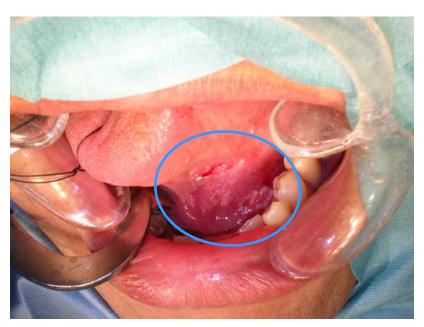


Head and Neck Cancer Registry of Japan, Clinical Statistics of Registered Patients, 2013

Oral cavity cancer



Oral tongue



Oral floor

Oropharyngeal cancer





Oropharynx

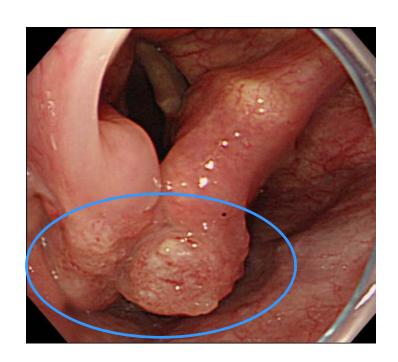
Reconstruction with Rectus abdominis muscle flap



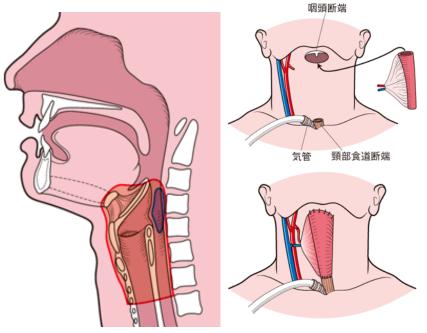
https://www.icrweb.jp

営利目的での使用はご遠慮ください

Hypopharyngeal cancer

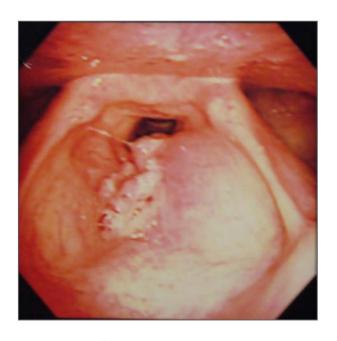


Hypopharynx

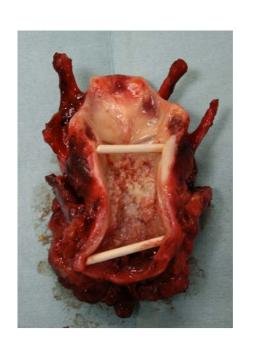


Free jejunum transfer after Total pharyngoesopagectomy

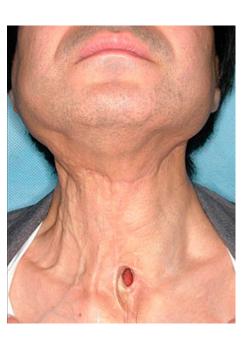
Laryngeal cancer



Larynx



Total laryngectomy



Functional impairment after CRT

- CRT sometimes causes severe late toxicities
- Affect QOL of Head and neck cancer patients







Pharyngeal stenosis

Poor clearance of sticky saliva

Aspiration



With courtesy of Professor Akihiro Homma, Yasushi Fujimoto and Nobuhiro Hanai

営利目的での使用はご遠慮ください

Why am I interested in HR-QOL?

- Head and neck cancer patients often suffer from problems specific to their cancer and treatments
- Sometimes difficult to evaluate with CTCAE
 - Restriction in speech
 - Difficulty in eating and swallowing
 - Quality of taste and smell
 - Disfigurement and dysfunction after surgery or (chemo-)
 - radiation
 - Etc.



Why am I interested in HR-QOL?

e.g. Difficulty in eating and swallowing by CTCAE v4.0

AEs	Grade 1	Grade 2	Grade 3	Grade 4	Grade 5
Dysphagia	Regular diet		Severely altered eating/swallowing	Life threatening	Death

- EORTC-HN35; many items related to eating/swallowing
 - Have you had problems swallowing liquids?
 - Have you had problems swallowing pureed food?
 - Have you had problems swallowing solid food?
 - Have you had problems opening your mouth wide?
 - Have you had trouble eating?
 - Have you had trouble eating in front of your family?
 - Have you had trouble eating in front of other people?
 - Have you had trouble enjoying your meals?

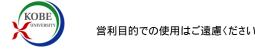


Why am I interested in HR-QOL?

- Some strange Japanese translations of QOL modules
 - Have you had problems having close physical contact with family or friends?
 - □ 家族や友人と肉体的接触を持つのに苦労しましたか?
 - Most of the Japanese pts fully understand this question
- Participation in EORTC HNG meeting since 2008
 - Most of the EORTC studies evaluate HR-QOL
 - Joint study between EORTC and JCOG was planning



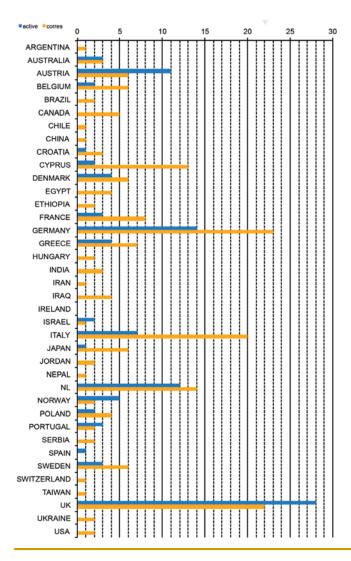
- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions



- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions



Participating countries in EORTC-QOLG



- 38 countries, mainly from Europe
- 316 members
 - Active members, 112
 - Corresponding members, 204
- 7 countries from Asia
 - China
 - India
 - Iran
 - Iraq
 - Japan; one active member from Asia
 - Nepal
 - Taiwan



Translation and validation

List of translations available by language - validated modules and C30

Languages	QLQ-C30	BM22	BN20	BR23	C15-PAL*	CR29	CX24	ELD14	EN24	GINET21	HCC18	H&N35	INFO25	IN-PATSAT32	1013	LMC21	MY20	OES18	0625	OH15	00/28	PR25	ST022
Afrikaans	Т		Т	Т	Т	Т	Т			Т	Т	Т			Т		Т	Т			Т	Т	Т
Albanian	T																						
Amharic	T			Т			Т																
Arabic	T	Т	Т	Т	Т	Т								Т	Т		Т						Т
Arabic (Egypt)												Т											
Arabic (Israel)											Т	Т						Т			Т	Т	
Arabic (Lebanon)											_		Т					_			_		
Bengali	Т			Т	Т		Т					Т	_		Т		Т					Т	Т
Bosnian	T			T	T							-			Т		-						
Bulgarian	T		Т	T	T			Т		Т		Т			T		Т				Т	Т	Т
Burmese	T		-	-	i			-		-		-			-		-					Ė	
Catalan	T				Т																	Т	
Cebuano	T			Т	i i				-		Т	Т			Т							_	Т
Chinese Mandarin (China)	T	Т	Т	T	Т	Т	T			Т	T	T	Т	Т	T		Т	Т			Т	Т	T
Chinese Mandarin		i i	Ė	100		Ė	_			_			_	_				÷		_			
(Malaysia)	T			Т	Т						Т	Т			Т		T				Т	Т	T
Chinese Mandarin	_		_	_	_	_	7				_	_			_		_	_			_	_	_
(Singapore)	Т		Т	Т	Т	Т					Т	Т			Т		Т	Т			Т	Т	Т
Chinese Cantonese (HK)	T	T	T	T	Т	T					Т	T			T		T	Т			T	Т	T
Chinese Mandarin (Taiwan)	T	T	T	Т	Т	Т	Т	Т	T		T	Т	Т	Т	Т		T	T			Т	Т	Т
Croatian	T			T	T		T	Т	T	T	T	Т	Т	T	T		T				Т	Т	Т
Czech	T		Т	T	Т	Т	T		T	T	T	T			T	Т	T	T			T	T	T
Danish	Т		Т	Т	T	T	T	Т	Т	Т	Т	Т	Т	Т	Т	-	Т	Т	T		Т	Т	Т
Dutch	Т	Т	Т	Т	Т	T	T	Т	Т	Т	T	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т
Estonian	Т		Т	Т	Т					Т	Т	Т			Т			Т			Т	Т	Т
Finnish	T		T	T	T	Т					T	T		T	T		T	T			Т	Т	T
French (Europe)	Т	T	Т	T	T	Т	Т	Т	Т	T	T	T	Т	Т	T	Т	Т	Т	Т	T	Т	Т	Т
French (Canada)	Т	T	T	T	Т	T					T	Т	Т		T		Т	Т			Т	T	Т
Ganda	T							-															
Georgian	Т			Т								T											
German	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	T	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т	Т
Greek	Т	T	Т	T	Т		-	Т		T	Т	T			T		T			Т	Т	Т	Т
Greenlandic	Т						-								1								
Gujarati	Т	П		T	Т							T			Т		T						Т
Hebrew	Т		Т	Т	Т	Т				Т	Т	Т			Т		T			Т	Т	Т	Т
Hindi	T	Т	Т	Т	Т	-	Т		1 ×	Т	T	Т	- 1		Т		Т	Т			Т	T	Т
Hungarian	T		Т	T	Т	Т			:	Т	Т	Т			Т		Т	Т			Т	Т	Т
Icelandic	T				Т	T			1 1					Т			- 1			-			Ť
Iloko	Т								- 1						Т		-						
Indonesian	T		Т		Т										Т		1					Т	
Italian	T	T	Ť	Т	Ť	Т	Т	Т	Т	Т	Т	Т	Т	Т	T		Т	Т	Т	Т	Т	Ť	Т
Japanese	T	T	T	T	T	T	T	-	•	T	T	T	T	_	T		T	T	T	T	T	T	T
Kannada	T	-	•	Ť	Ť	-					,	T			T		T	_			-	Ė	Ť
Kazakh	T		Т	_	Ė										-								Ė

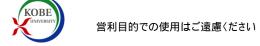
- EORTC-QLQ-C30
 - Translated into over 90 languages
 - Used on over 3,000 trials
- Japanese version
 - QLQ-C30
 - Disease-specific modules
 - Breast (BR-23)
 - CRC (CR-29)
 - HNC (HN-35)
 - Lung (LC-13)
 - Gastric (STO-22)
 - etc.

Updated June 2016



Development of questionnaires in EORTC

- Phase I: Generation of relevant QOL issues
- Phase II: Conversion of the QOL issues into a set of items
- Phase III: pilot testing of new item list or module
- Phase IV: Large-scale international field testing, validation



Development of questionnaires in EORTC

- Phase IV: Large-scale international field testing, validation
 - Should be tested in a large, international group of patients
 - To determine
 - acceptability
 - reliability
 - validity
 - responsiveness
 - Cross-cultural applicability
 - After completing Phase IV, it will be made available for general use



Translation Procedures (1)

- Translation process into Japanese
 - two initial forward translations
 - English to Japanese, by native Japanese speakers
 - reconciled version
 - two backward translations
 - Japanese to English, by native English speakers
 - interim translation and an interim report
 - pilot testing and a report after pilot testing
 - final translation



Translation procedures (2)

Example of translation procedures in THY phase I





甲状腺がん患者さんの QOL(生活の質)を検討するにあたって、どのような項目が重要かを調査しています。

以下の項目をみて、それぞれの項目について、あなたがどのくらい重要かと思うかをチェックして下さい。また、あなたがその中でも特に重要と感じた25項目をチェックして下さい。

		重要と	特に重要			
						な項目
		全く	少し	多い	非常に	25 項目を
		ない			多い	チェック
31	employment	1	2	3	4	
32	being judged	1	2	3	4	
33	being a burden to others	1	2	3	4	
34	social support from families and friends	1	2	3	4	
35	social support from health care providers	1	2	3	4	
36	sudden attacks of tiredness	1	2	3	4	
37	mentally exhausted	1	2	3	4	
38	physically exhausted	1	2	3	4	
39	problems with weight gain	1	2	3	4	
40	problems with weight loss	1	2	3	4	





Backward translation





甲状腺がん患者さんの QOL(生活の質)を検討するにあたって、どのような項目が重要かを調査しています。

以下の項目のそれぞれについて、あなたにとってどのくらい重要と思うかをチェックして下さい。また、あなたがその中でも特に重要と感じた 25 項目をチェックして下さい。

		重要と思う程度				特に重要な項目
Q		全くな	少し	多い	非常に	25 項目をチ
		V)			多い	エック
31	雇用	1	2	3	4	
32	評価されること	1	2	3	4	
33	他人への負担となること	1	2	3	4	
34	家族や友人からの社会的支援	1	2	3	4	
35	医療サービス提供者からの社会的支援	1	2	3	4	
36	疲労感に突然襲われること	1	2	3	4	
37	精神的に疲れた	1	2	3	4	
38	肉体的に疲れた	1	2	3	4	
39	体重増加の問題	1	2	3	4	
40	体重減少の問題	1	2	3	4	



To introduce EORTC-QOL modules into Japan

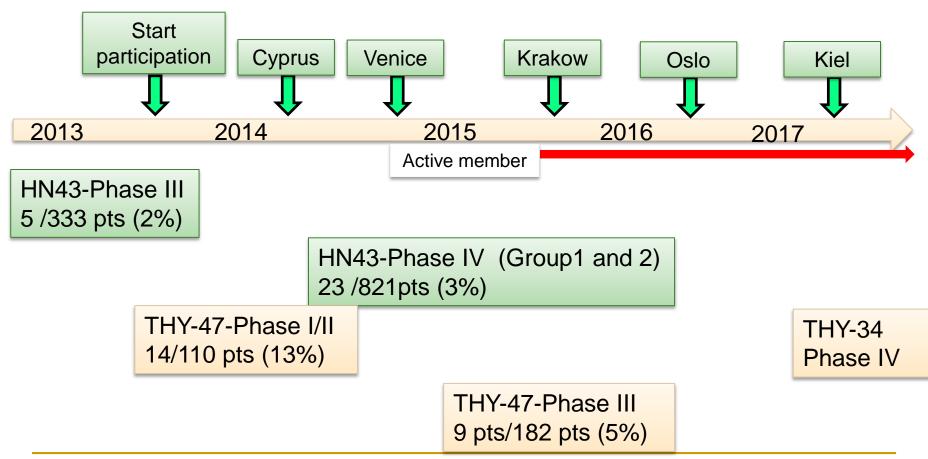
- Translation of completed form of questionnaire into Japanese
 - Merit
 - Easy and time-sparing
 - Needs small sample size for validation
 - Demerit
 - No reflection of Japanese subset (JPN subset)
- Participation in development process of questionnaire
 - Merit
 - Reflection of JPN subset
 - Direct communication with EORTC QOL-G
 - Demerit
 - Needs larger sample size to reflect JPN subset
 - Translation of protocol, CRF and ICF into Japanese is troublesome



営利目的での使用はご遠慮ください

Actual participation in EORTC-QOLG from Japan

- Around 5% of total sample size
- More enrollment to reflect characteristics of JPN subset





営利目的での使用はご遠慮ください



EORTC Thyroid Cancer Module- Phase I/II -

EORTC Spring Meeting 2014 Limassol (Cyprus)





EORTC Thyroid Cancer Module- Phase IV -





EORTC Autumn Meeting 2017 Kiel

Some contributions to EORTC-QOLG from Japan

- Updated head and neck cancer module (HN-43)
 - Phase III: published in 2014
 - Phase IV: completed accrual and the manuscript submitted
 - HN-43 will be available for general use, soon.

ORIGINAL ARTICLE

Measuring quality of life in patients with head and neck cancer: Update of the EORTC QLQ-H&N Module, Phase III

Susanne Singer, PhD,¹* Cláudia Araújo, MD,² Juan Ignacio Arraras, PhD,³ Ingo Baumann, MD,⁴ Andreas Boehm, MD,⁵ Bente Brokstad Herlofson, MD,⁶ Joaquim Castro Silva, MD,⁷ Wei-Chu Chie, PhD,⁸ Sheila Fisher, MD,⁹ Orlando Guntinas—Lichius, MD,¹⁰ Eva Hammerlid, MD,¹¹ María Elisa Irarrázaval, MD,¹² Marianne Jensen Hjermstad, PhD,¹³ Kenneth Jensen, MD,¹⁴ Naomi Kiyota, MD,¹⁵ Lisa Licitra, MD,¹⁶ Ourania Nicolatou—Galitis, MD,¹⁷ Monica Pinto, MD,¹⁸ Marcos Santos, MD,¹⁹ Claudia Schmalz, MD,²⁰ Allen C. Sherman, PhD,²¹ Iwona M. Tomaszewska, MD,²² Irma Verdonck de Leeuw, PhD,²³ Noam Yarom, MD,²⁴ Paola Zotti, MD,²⁵ Dirk Hofmeister, PhD,²⁶ on behalf of the EORTC Quality of Life and the EORTC Head and Neck Cancer Groups



Some contributions to EORTC-QOLG from Japan

- Novel thyroid cancer module (THY-34)
 - Phase I/II: published in 2016
 - Phase III: published in 2017
 - After evaluating Phase IV, it will be made available for general use

Research	S Singer et al.	EORTC QLQ-THY phase III	24:4	197 –207

The EORTC module for quality of life in patients with thyroid cancer: phase III

Susanne Singer¹,², Susan Jordan³, Laura D Locati⁴, Monica Pinto⁵,
Iwona M Tomaszewska⁶, Cláudia Araújo², Eva Hammeriid®, E Vidhubalaց,
Olga Husson¹o, Naomi Kiyota¹¹, Christine Brannan¹², Dina Salem¹³, Eva M Gamper¹⁴,
Juan Ignacio Arraras¹⁵, Georgios Ioannidis¹⁶, Guy Andry¹७, Johanna Inhestern¹®,
Vincent Grégoire¹ց, Lisa Licitra⁴ on behalf of the EORTC Quality of Life Group,
the EORTC Head and Neck Cancer Group, and the EORTC Endocrine Task Force



Thyroid. 2016 Nov;26(11):1605-1613

Endocrine-Related Cancer(2017) 24, 197-207

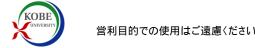
Some contributions to EORTC-QOLG from Japan

- Phase I/II study for Novel thyroid cancer module
 - Patients enrollment from 8 centers of 7 countries
 - Germany, Austria, Netherland, UK, Poland, Italy, Portugal, Japan
- Difference between European countries and Japan
 - Issue 'unanswered questions about disease and treatment'
 - 86% of Japanese patients selected this as relevant concern
 - 36% of all patients selected this issue
 - May related to cultural or racial difference of JPN subset
 - Most of the Japanese patients received tyrosine kinase inhibitors
 - 78% of all patients never received tyrosine kinase inhibitors
 - Single institution of medical oncology department from Japan



Thyroid (2016) 26, 1605–1613

- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions



- Introduction
- Why am I interested in HR-QOL
- Participation in EORTC-QOLG from Japan
- Conclusions



Present status and future direction of collaboration with EORTC-QOLG from Japan

- Present status
 - Some achievements from the collaboration
 - Be an active member from Japan
 - Contributions to new HN and THY modules
 - Problems
 - Still small enrollment from Japan
 - Participation from single institution
 - No organizational activity for this collaboration
- Future directions
 - Establishment of organized participation from Japan
 - Recognition and prevalence of PRO/HR-QOL in Japan



営利目的での使用はご遠慮ください

Thank you for your attention !!



Naomi Kiyota, MD, PhD, Kobe University Hospital Cancer Center Japan nkiyota@med.kobe-u.ac.jp

