Was It Worth It (WIWI)? An OHSU Knight Cancer Institute Retrospective Analysis of Patient Satisfaction Following Radiotherapy

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INTRODUCTION

- Existing data on patient satisfaction after radiotherapy is scarce
- A 2011 study on stage III colon cancer patients participating in a clinical trial utilized a 4-item ‘Was It Worth It (WIWI)’ Questionnaire to assess patient satisfaction and found older age and the addition of cetuximab to FOLFOX were associated with lower levels of satisfaction

OBJECTIVES

- To describe the clinical experience at a regional, tertiary care hospital for cancer patients having completed radiotherapy at Oregon Health & Science University’s Knight Cancer Institute

MATERIALS AND METHODS

- The records of OHSU patients that completed a 5-item Was It Worth It (WIWI) Questionnaire highlighting patient satisfaction were reviewed
- These data were collected upon completion of treatment and, if available, first follow-up
- Univariate analysis and logistic regression modeling were performed on patient demographic and treatment characteristics to ascertain predictors of satisfaction

RESULTS

- Last Day of RT

<table>
<thead>
<tr>
<th>Completed questionnaire (n)</th>
<th>200</th>
<th>60</th>
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</thead>
<tbody>
<tr>
<td>Days from end of RT to follow-up</td>
<td></td>
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<tr>
<td>17</td>
<td>46</td>
<td>median</td>
</tr>
<tr>
<td>302</td>
<td></td>
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<tr>
<td>Elapsed Days of Treatment</td>
<td></td>
<td></td>
</tr>
<tr>
<td>34</td>
<td>64</td>
<td>median</td>
</tr>
<tr>
<td>Age (years)</td>
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</tr>
<tr>
<td>29</td>
<td>66</td>
<td>median</td>
</tr>
<tr>
<td>90</td>
<td></td>
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Q1: Was it worthwhile for you to receive radiation therapy?

Q2: If you had to do it over, would you select to receive radiation therapy again?

Q3: Would you recommend receiving radiation therapy to others?

Q4: Did your quality of life get better by receiving radiation therapy?

Q5: Morning versus Afternoon

Q6: Total Elapsed Days

CONCLUSIONS

- Radiotherapy as being ‘worthwhile’ was associated with morning treatment times and total duration of treatment as measured by total elapsed days
- No significant predictors of improved QOL
- Age, gender, race, marital status, employment, treatment intent or modalities, treatment delays, distance travelled, insurance type, anatomic site of treatment, and cancer stage were not predictive of patient satisfaction
- The majority of patients are satisfied with radiotherapy but room for improvement exist with those treated in afternoon or in shorter durations