

**Scottish Lung Cancer Forum**  
**Co-morbidity study**

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# REASONS FOR VARIATION IN TREATMENT AND SURVIVAL

## PATIENT RELATED

P.S  
Comorbidity  
Deprivation

## TUMOUR RELATED

Stage  
Aggressiveness of tumour

## SERVICE RELATED

Aggressiveness of MDT  
Access to investigations / treatment  
Variable data collection

## Method

4 Centres: Aberdeen, Fife, Stobhill (Glasgow), Inverclyde

Data collected prospectively

- Patient details (gender, age, postcode)

- Performance status: at presentation, 6 months prior

- Laboratory parameters (creatinine, CRP, FEV1 ...)

- Co-morbidity (validated severity scores 0-3 for 12 co-morbidities; SCI)

- MDT (discussed Y/N, those present)

- By stage and tumour type, ideal primary treatment and actual treatment.

- For 'no histological diagnosis', reason why and treatment plan

Entered into Access database

Survival currently being collected

# Scoring of co-morbidity (Scottish Comorbidity Index)

## COPD (BTS/GOLD guidelines)

- 0 No disease
- 1 FEV1 > 60%
- 2 FEV1 40-60%
- 3 FEV1 < 40%

## IHD (Canadian CV Society Classification)

- 0 No disease
- 1 Angina with strenuous/prolonged exertion
- 2 Angina after walking 200 hundred yards flat/flight stairs
- 3 Inability to carry on any level of exertion/angina at rest

## CCF (NYHA classification)

- 0 No disease
- 1 Slight limitation of physical activity due to dyspnoea
- 2 Comfortable at rest, less than ordinary activity causes dyspnoea
- 3 Dyspnoea at rest

## CVA (NIH Stroke Scale)

## Dementia (Clinical Dementia Rating)

## Diabetes (No disease, HbA1c)

## Renal Failure (GFR)

## Previous malignancy

## Weight Loss (0, <5%, 5-10%, >10%)

## Peripheral Vascular Disease (claudication)

## Alcohol (units/wk)

## Results

4 Centres: Aberdeen, Fife, Stobhill (Glasgow), Inverclyde

Patient details collected

Aberdeen	October 2005 – February 2007
Fife	June 2006 – April 2008
Stobhill, Glasgow	December 2005 – April 2008
Inverclyde	October 2005 – December 2007

Total number of patients 882

Aberdeen	297 (34%)
Fife	136 (15%)
Stobhill, Glasgow	285 (32%)
Inverclyde	164 (19%)

## SLC Forum Comorbidity Study – Demographics

	<b>All centres n=882</b>	<b>Aberdeen n=297</b>	<b>Fife n=136</b>	<b>Stobhill, Glasgow n=297</b>	<b>Inverclyde n=164</b>	<b>P (between centres)</b>
Age mean (95% CI)	70.4 (69.7-71.0)	68.7 (67.5-69.8)	71.0 (69.1-72.9)	70.5 (69.4-71.6)	72.6 (71.0-74.2)	0.001
% male	55.2%	60.3%	58.1%	49.1%	54.3%	0.049
Socio-economic status % in most deprived quintile of SIMD	30.3%	5.4%	0	63.9%	42.1%	<0.001
Socio-economic status % in most affluent quintile of SIMD	7.0%	18.9%	0	0	3.7%	<0.001
% performance 0/1 6 months prior to presentation	79.1%	81.1%	81.5%	76.4%	78.3%	0.470
% performance 0/1 at presentation	46.8%	58.2%	52.9%	42.8%	28.0%	<0.001
% performance fell from 0/1 to 2/3/4 in 6 months prior to presentation	40.9%	28.2%	35.5%	43.8%	65.1%	<0.001
Serum albumin Mean (95% CI) g/l	36.6 (36.1-37.0)	40.0 (39.4-40.6)	36.0 (35.1-36.9)	33.1 (32.4-33.8)	36.5 (35.6-37.4)	<0.001
% Non-small cell stage I or II	20.5% (109/531)	27.2% (47/173)	22.2% (18/81)	17.6% (27/153)	13.7% (17/124)	0.028

# Between centre differences in patients

## Gender profile

55% men

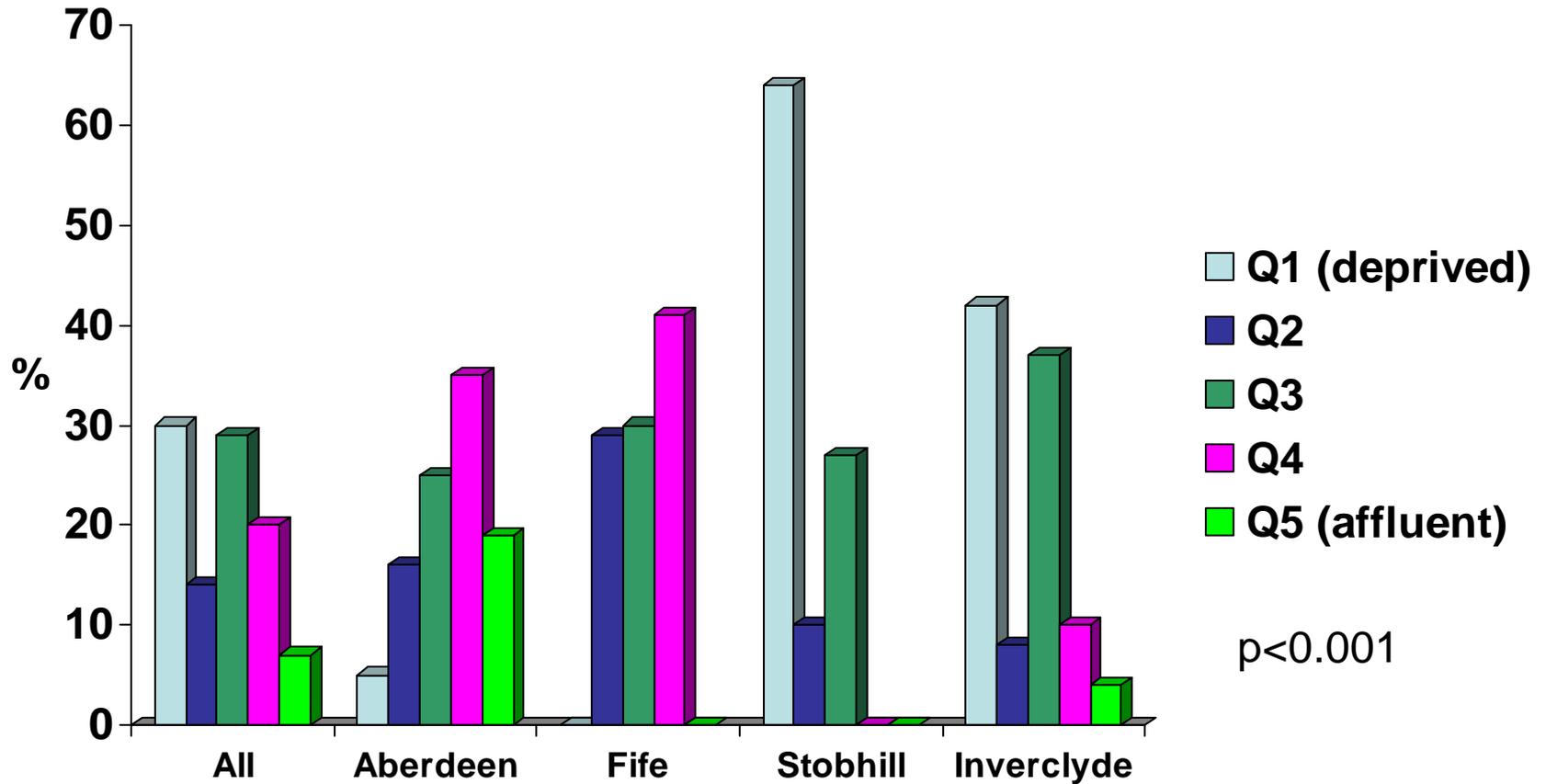
Aberdeen	60% men	
Fife	58%	
Stobhill	49%	
Inverclyde	54%	p=0.049

## Age profile

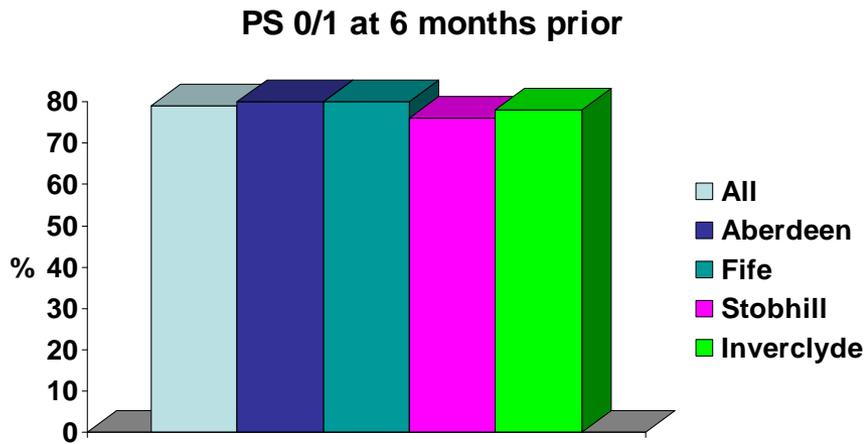
Mean age 70.4 yrs (youngest 31 oldest 94)

Aberdeen	68.7	
Fife	71.0	
Stobhill	70.5	
Inverclyde	72.6	p=0.001

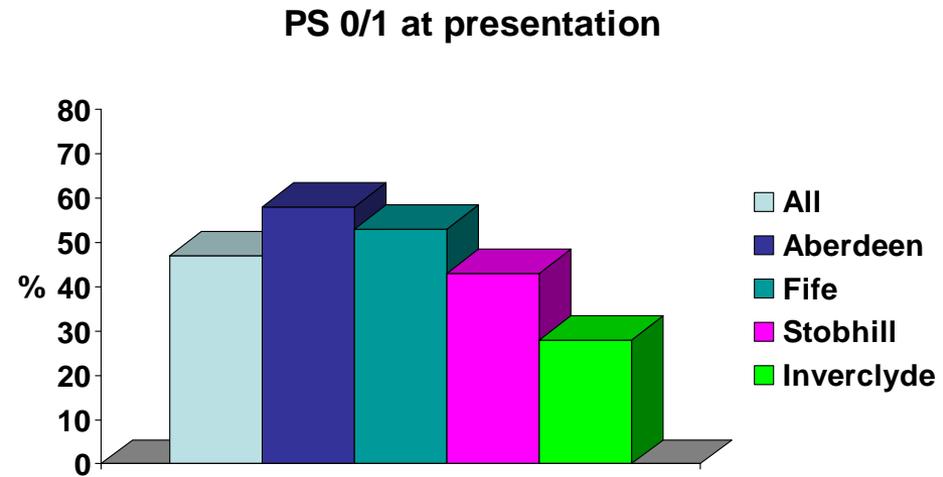
# Between centre differences in patients Quintiles of social deprivation



# Between centre differences in patients: Performance status

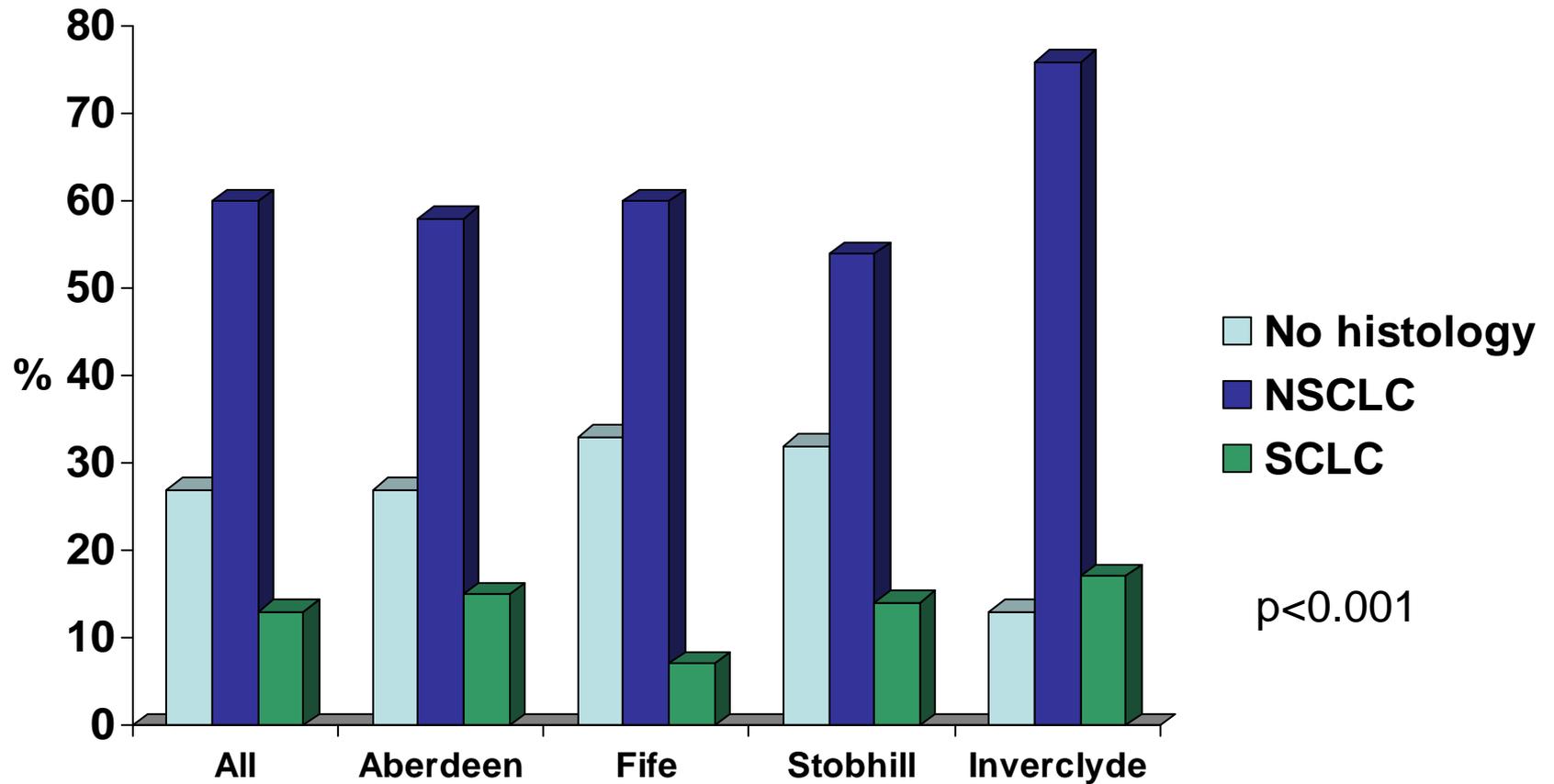


$p > 0.05$

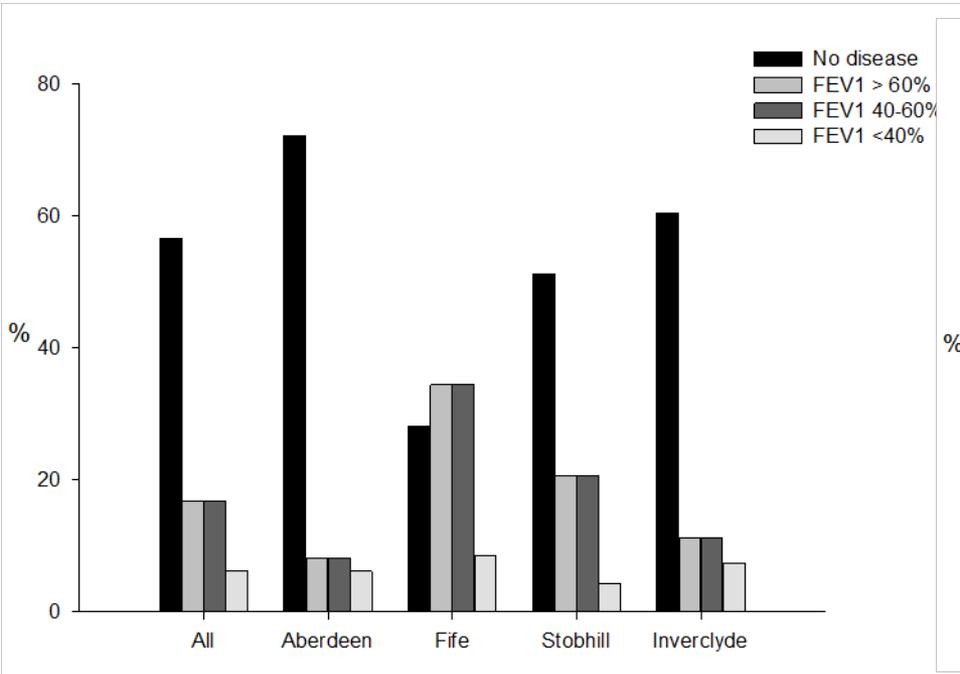


$p < 0.001$

# Between centre differences in patients Tumour histology

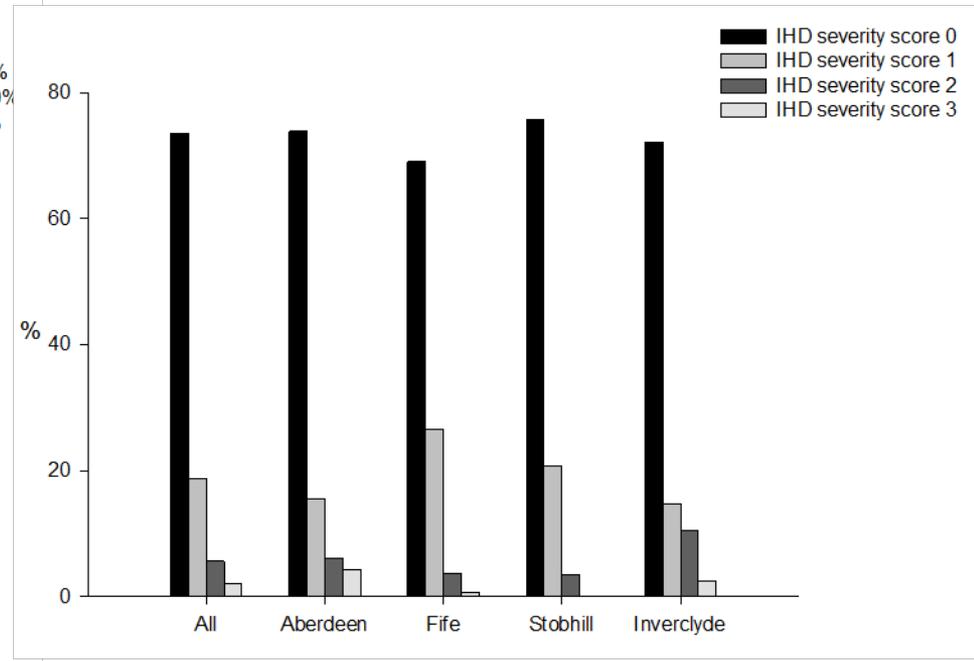


# COPD



P = 0.017

# IHD



P < 0.001

## SLC Forum Comorbidity Study – Treatment variations

	All centres n=882	Aberdeen n=297	Fife n=136	Stobhill n=297	Inverclyde n=164	P (between centres)
Obtained histological diagnosis	75.5%	73.4%	66.9%	74.9%	87.2%	<0.001
Surgical resection	6.3%	7.4%	6.6%	5.6%	5.5%	0.790
Radical Radiotherapy	4.0%	4.0%	8.8%	3.1%	0.6%	0.004
No surgery / chemo / radiotherapy	20.6%	10.8%	36.8%	22.5%	22.0%	<0.001

## **Early conclusions**

Variation in practice, across Scotland

Variation in Comorbidity across Scotland

Deprivation is strongly associated with poor PS and deteriorating PS, independent of co-morbidities.

Early days: further analyses re: multivariate factors and survival etc required.

# Determinants of declining Performance Status

Assessed PS at presentation and estimated PS 6 months prior.

59.1% PS 0/1 6 months prior; 0/1 at presentation

40.9% PS 0/1 6 months prior had deteriorated to 2-4 at presentation

NSCLC

No deterioration: 16.8% surgical intervention

Deterioration: 3.0% surgical intervention

## Determinants of Performance Status

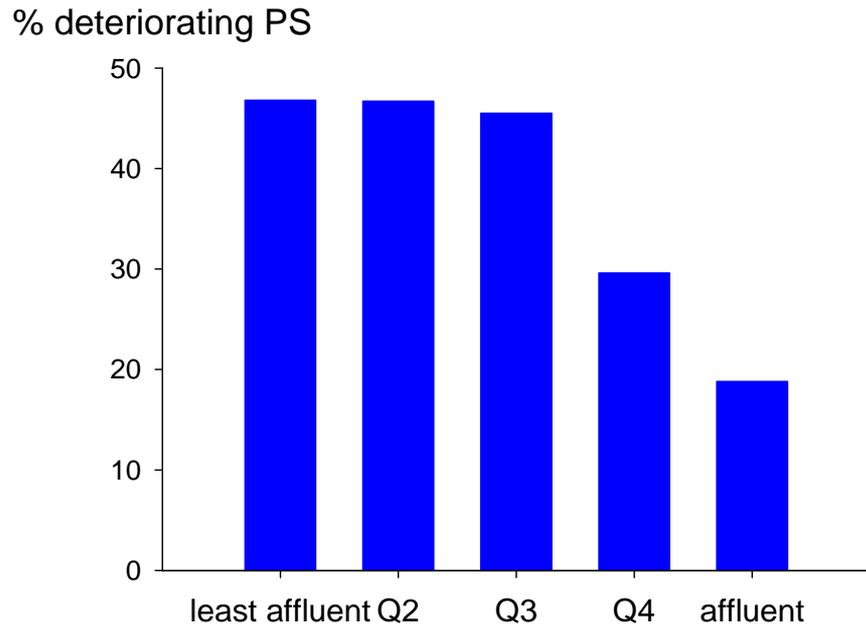
Multivariable analysis

PS 0/1 vs 2-4	Odds ratio (95% CI)		p
Age /yr	0.96	(0.94-0.97)	<0.001
Affluence	1.31	(1.16-1.47)	<0.001
COPD /stage	0.77	(0.66-0.90)	0.001
Stroke disease /stage	0.44	(0.28-0.69)	<0.001
Dementia /stage	0.45	(0.28-0.74)	0.002
Weight loss /5% loss	0.61	(0.54-0.68)	<0.001
Ischaemic heart dis /stage	0.75	(0.60-0.94)	0.013

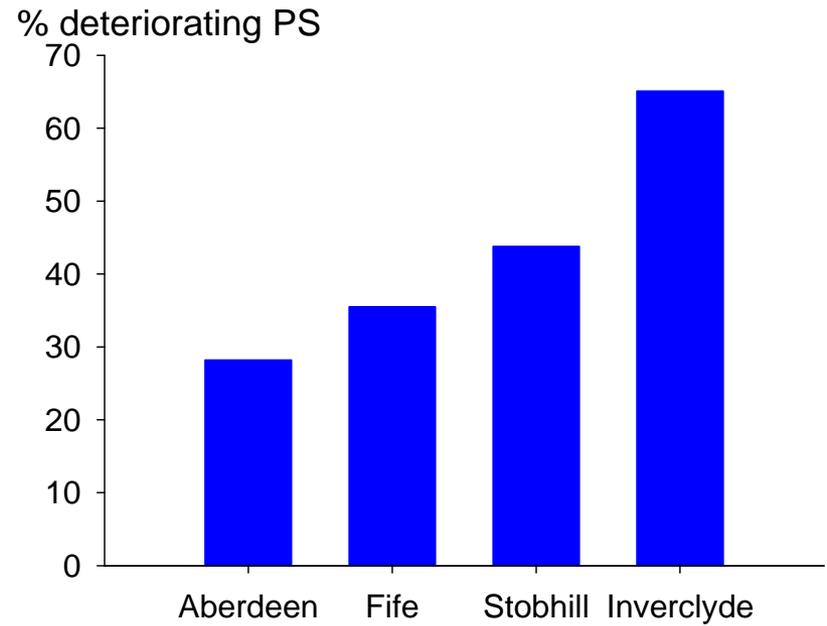
Affluent vs least affluent 3.9 times more likely to be PS 0/1

# Determinants of declining Performance Status

## Deprivation



## Centre



# Determinants of declining Performance Status

Multivariable analysis

PS declining 0/1 to 2-4	Odds ratio (95% CI)		p
Age /yr	1.04	(1.02-1.06)	<0.001
Affluence	0.69	(0.60-0.80)	<0.001
COPD /stage	1.26	(1.05-1.51)	0.015
Stroke disease /stage	2.21	(1.27-3.85)	<0.001
Weight loss /5% loss	1.82	(1.58-2.08)	<0.001

Least affluent vs affluent 6.4 times more likely to deteriorate from PS 0/1 to 2-4 by presentation