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QUALITY OF LIFE IN ADULT SURVIVORS OF ALLOGENEIC BONE MARROW TRANSPLANTATION (BMT). M Andrykowski, (1) P Henslee, (2) University of Kentucky College of Medicine, Depts of (1) Behavioural Science & Medicine, (2) Lexington, KY 40536-0086. U.S.A.

Despite increasing likelihood of long-term survival, little data exists concerning quality of life (QL) following BMT. Twenty-three of 24 consecutive adult patients who were at least three months post-allogeneic transplant participated in a study of post-BMT QL. At the initial assessment, patients were interviewed and completed the Functional Living Index-Cancer (FLIC) and the Profile of Mood States (POMS). Patients were a mean of 34.9 years of age and 26.2 months post-BMT. At a follow-up assessment a mean of 9 months later, patients (n=21) were again interviewed and also completed the FLIC and POMS and 5 subscales from the Sickness Impact Profile (SIP). Results indicated that current functioning varied among patients. Relative to samples of other cancer patients, BMT patients evidenced better overall functioning (FLIC) but greater mood disturbance (POMS). Age at BMT was significantly related to post-BMT QL: older patients evidenced poorer QL on the FLIC, POMS, AND SIP (all p's <0.10). Increased time post-BMT was not associated with improved QL, using either cross-sectional or within-patient repeated measures analyses. At the follow-up interview, patients reported post-BMT changes including reduced energy (67%) and strength (29%), shortness of breath (33%), and sexual (43%), sleep (29%), memory (62%) and concentration (29%) difficulties. Occupational disability was also common: only 20% of patients employed full-time prior to BMT, were employed full-time at the follow-up. Responses on the SIP also reflected difficulties in sexual and cognitive functioning as well as some restriction of social, recreational and routine home maintenance activities. In sum, while most patients, expected to return to "normal" after their transplant, a minority actually did. Nevertheless, only one patient indicated that they would not again choose to undergo BMT.