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INTERPRETATION OF QUALITY OF LIFE (QL) DATA IN A RANDOMIZED, PHASE III STUDY OF SMALL CELL LUNG CA. (SCLC) J Bernhard, P Guex, I Blaschegg-Honsalek, H Egli, P Guex, A. Gunn-Sechehaye, V. Scharer, M. Tomamichel, Ch. Hurny. Working Group Psycho-Oncology of the Swiss Group for Clinical Cancer Research SAKK, Seidenweg 63, 3012 Bern.

SCLC-patients four undergoing combination chesotherapy were given a QL-questionnaire, including an early version of the EORTC-questionnaire, mood adjective checklist (Bf-S) and a LASA-scale for general well-being, before each of six treatment cycles. A preliminary analysis at baseline and during treatment, shows that the patients describe their subjective state as being substantially better than might be expected on the basis of clinical experience. In order to explore the external validity of the QL-questionnaire in 18 selected patients, open-ended interviews, audiotaped during different phases of treatment, were carried out. In a qualitative psychodynamic analysis of these interviews, a tendency towards positive statements was less pronounced than in the QLquestionnaire. The physician-patient-interaction allowed negative aspects to emerge and in most cases, the occurrence of severe physical and psychological symptoms was obvious. However, the patients themselves tended to emphasize the healthy parts of their lives, rather than to focus upon disease-related aspects.

Social desirability as a known factor does not explain this phenomenon sufficiently. Our hypothesis is that patients underestimation of symptoms in the questionnaire, reflects a remarkable adaptive achievement in restoring self-esteem. The process of coping leads to a modification of individual norms of well-being and health. Therefore in QL-research a longitudinal design, taking the patient as his own control is mandatory, since coping is an individual process over time.