

# Radiation Therapy & Patient Quality of Life

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## In the Literature

Serras AR, Berlato D, Murphy S. Owners' perception of their dogs' quality of life during and after radiotherapy for cancer. *J Small Anim Pract.* 2019;60(5):268-273.

## FROM THE PAGE ...

The perception of a pet's quality of life (QOL) during cancer therapy is a common concern among pet owners when making cancer treatment decisions. Radiation therapy (RT) is most commonly recommended as part of a multimodal approach to local disease control (ie, combined with surgery and/or chemotherapy). RT can be administered on a palliative basis or as a definitive protocol. Definitive protocols typically consist of 15 to 20 daily treatments, whereas palliative therapy consists of 3 to 4 weekly treatments. Acute adverse effects of definitive RT can include mucositis, leukotrichia, and localized discomfort and can generally be managed with pain and anti-inflammatory medications on an as-needed basis. Acute adverse effects typically resolve relatively quickly with supportive care. Palliative approaches are typically associated with a much lower risk for acute adverse effects and are often appealing for this reason; however, palliative approaches vary in efficacy, as they are designed to provide comfort and slow progression of disease. Palliative RT typically does not lead to long-term disease control.

This study sought to determine owners' perceptions of their dog's QOL during and after RT. Seventy-one owners were surveyed about their feelings and experiences with regard to their dog's RT. Results found that 92% of respondents were happy they had chosen to treat their pet with RT; 88% reported they would consider RT in another pet if it were indicated. Across all time points (ie, prior to RT, on the last day of RT, >6 weeks after RT), owner-reported QOL scores were consistently high; owner satisfaction with the decision to pursue RT was independent of the protocol chosen. When palliative care was evaluated separately,

however, QOL scores 6 weeks after completion of RT were lower than scores given before treatment. Because acute adverse effects are not generally seen with palliative approaches, this lower scoring may be attributed to possible earlier disease progression with palliative approaches.

## ... TO YOUR PATIENTS

Key pearls to put into practice:

- 1** Most owners who choose to pursue RT are happy with their decision. Although adverse effects can occur, these tend to be manageable and do not significantly affect a pet's QOL during therapy.
- 2** Owner education is critical. RT requires significant time and financial commitment. Definitive RT is most commonly used for incompletely or marginally excised disease (eg, soft tissue sarcoma, anal sac adenocarcinoma, mast cell tumor). Because RT is only useful for local disease control, staging prior to RT is recommended. Palliative therapy may be used for any tumor with limited risk for acute adverse effects; however, the goal of this approach is to provide comfort, and efficacy is variable.
- 3** Referral to an oncologist is recommended to discuss the pros and cons of each approach, as well as the expectations of therapy.