

بسم الله الرحمن الرحيم





HOSSAM MAGHRABY





شبكة المعلومات الجامعية التوثيق الالكتروني والميكروفيلم



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`ASSESSMENT OF QUALITY OF LIFE AMONG COLORECTAL CANCER SURVIVORS

Thesis
Submitted for Fulfillment of Master Degree
in Clinical Oncology & Nuclear Medicine

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List of Abbreviations

Abb.	Full term
ΔDT	Androgen deprivation therapy
	Adenomatous polyposis coli
	American Society of Clinical Oncology
	Body mass index
	Carcinoembryonic antigen
	Cystic Fibrosis Foundation
	CpG island methylator phenotype
	Chromosomal instability
	Cyclooxygenase-2
CT	Computed tomography
<i>DFMO</i>	Difluoromethylornithine
<i>ECM</i>	Extra-cellular matrix
EGFR	Epidermal growth factor receptor
<i>FAP</i>	Familial adenomatous polyposis
FDA	Food and Drug Administration
GnRH	Gonadotropin-releasing hormone
<i>GRADE</i>	Grading of Recommendations Assessment,
	Development, and Evaluation
<i>HNPCC</i>	Hereditary nonpolyposis colorectal cancer
<i>HPV</i>	Human papilloma virus
HR	Hazard ratio
HS	Highly significant
<i>IGF-1</i>	Insulin-like growth factor 1
IGFBP-3	IGF binding protein-3
<i>LPS</i>	Lipopolysaccharide
<i>MAbs</i>	Monoclonal antibodies
<i>MAP</i>	MUTYH-associated polyposis
<i>MECC</i>	Molecular Epidemiology of Colorectal Cancer

List of Abbreviations (Cont...)

Abb.	Full term
<i>MECC</i>	Molecular Epidemiology of Colorectal Cancer
<i>MMR</i>	Mismatch repair mutation
MSIhi	Microsatellite instability
<i>MUTYH</i>	MUTY homolog
<i>NAP</i>	NTHL-associated polyposis
<i>NIH</i>	National Institutes of Health
<i>NMR</i>	Nuclear magnetic resonance
<i>NS</i>	Non significant
NSAIDs	Nonsteroidal antiinflammatory drugs
QOL	Quality of life
<i>RR</i>	Relative risk
S	Significant
<i>SEER</i>	Surveillance, Epidemiology, and End Results
<i>SES</i>	Socioeconomic status
TCGA	The Cancer Genome Atlas
<i>TNF</i>	Tumor necrosis factor
<i>TPA</i>	Tissue polypeptide
<i>USG</i>	Ultrasonography
<i>VEGF</i>	Vascular endothelial growth factor
WHI	Women's Health Initiative
WHO	World Health Organization

INTRODUCTION

Globally, CRC is the third most commonly diagnosed cancer in males and the second in females, according to the World Health Organization GLOBOCAN database. More than 1.9 million new colorectal cancer (including anus) cases and 935,000 deaths were estimated to occur in 2020, representing about one in 10 cancer cases and deaths. Overall, colorectal ranks third in terms of incidence, but second in terms of mortality (*Sung*, 2021).

Survival rates have increased throughout the last decades because of earlier diagnosis, improved diagnostic tests, introduction of adjuvant therapy, and advances in the treatment of metastatic disease. Approximately 80% of patients now survive the first year after diagnosis, and approximately 62% survive 5 years and more (*Tarver*, 2019).

Besides disease-free and overall survival time, quality of life (QOL) has become an important outcome measure for cancer patients. The term quality of life refers to a multidimensional concept, which includes, at least, the dimensions of physical, emotional, and social functioning. In addition, assessment of QOL in patients with cancer may improve our understanding of how cancer and therapy influence the patients' lives and how to adapt treatment strategies (*Bleiberg & Hendlisz*, 2002).

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The term quality of life (QoL) is used to evaluate the general well-being of individuals and societies. According to the World Health Organization (WHO), quality of life (QoL) defined as individual perception of life, values, objectives, standards, and interests in the framework of culture. A number of illness-related factors exist that can affect QoL. The amount of symptoms distressed experienced by an individual has been related to QoL in a number of people with cancer. QoL is increasingly being used as a primary outcome measure in effectiveness of studies evaluate the treatment (Pratheepawanit et al., 1999). Instead of measuring lipoprotein level, blood pressure, and the electrocardiogram, make decisions about their health care by means of QoL, which estimates the effects on outcomes important to themselves.

Cancer and its treatment have a major impact on patients' lives, which can lead to difficulties in fulfilling family roles, the ability to work, or participating in common social activities. Even when successfully treated, cancer may result in long-term physical and psychological consequences.

Because most colorectal cancer patients survive beyond five years Based on long-term data from the National Cancer Institute, the 5-year relative survival rate for colon cancer increased from 51% in the mid-1970s to 66% during 2006-2012, and similarly from 48% to 68% for rectal cancer ("ACS" Cancer Facts and Figures," 2020).

Understanding quality of life among these long-term survivors is essential to providing comprehensive survivor care.