

# Associations of Cancer and Other Chronic Health Conditions with SF-6D Preference-based Scores among Medicare Beneficiaries

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<http://gim.med.ucla.edu/FacultyPages/Hays/>

# Existing Literature

- ❖ Most chronic medical conditions have a negative impact on daily functioning and well-being.
  - Rothrock et al., J Clin Epidemiology, 2010
- ❖ Medicare managed care beneficiaries with cancer report significantly worse physical health (SF-36 physical component summary score) than those without cancer.
  - Smith et al., Health Care Financing Review, 2008
- ❖ Significantly worse mental health is reported for some cancers (non-small cell lung, non-Hodgkin's lymphoma, female breast, colorectal, and bladder)
  - Smith et al., Health Care Financing Review, 2008

# Specific Aims

Among Medicare managed care beneficiaries ...

- 1) Do the associations of different types of cancer and (non-cancer) chronic conditions with health-related quality of life vary among Medicare managed care beneficiaries?
  - main effects
- 2) Do the associations of non-cancer conditions with health-related quality of life differ for those who have cancer versus do not?
  - interaction effects
- 3) Do the associations between cancer and health-related quality of life vary by stage of disease?

# SEER-MHOS Dataset (1)

- Surveillance, Epidemiology and End Results (SEER) program of cancer registries that collect standardized clinical and demographic information for persons with newly diagnosed (incident) cancer in specific geographical areas
- Began in 1973 and covers ~ 26% of U.S. pop.
  - <http://seer.cancer.gov/registries/list.html>
  - California, Connecticut, Hawaii, Iowa, Kentucky, Louisiana, New Mexico, New Jersey, Utah
  - Atlanta, Detroit, rural Georgia, Seattle-Puget Sound metropolitan areas

# SEER-MHOS Dataset (2)

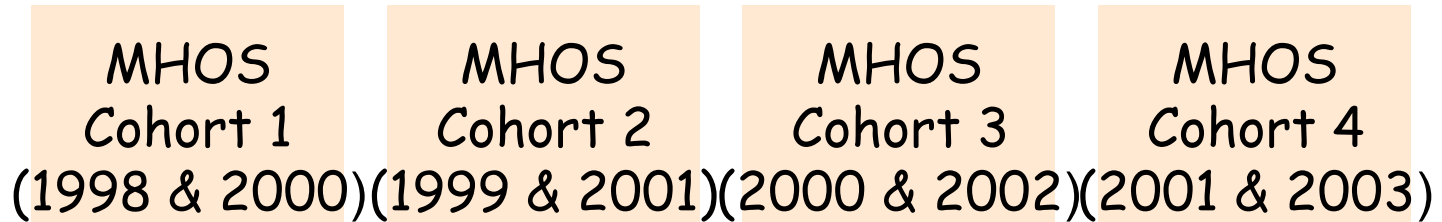
- Medicare Health Outcomes Survey (MHOS)
  - 95-item survey administered to 1,000 randomly selected beneficiaries (including institutionalized and disabled) in Medicare managed care plans
  - Baseline and follow-up survey (2 years later).
  - 63-72% response rates for baseline surveys
  - MHOS respondents matched using identifiers to SEER-Medicare file for 4 cohorts (1998 to 2003).

<http://outcomes.cancer.gov/surveys/seer-mhos/>

# Limitations

- Does not include:
  - Those who did not complete at least one MHOS survey.
    - Medicare managed care beneficiaries not in MHOS (Including SEER cancer patients)
  - Medicare fee-for-service beneficiaries
  - Information on Medicare claims, prescription drug information, chemotherapy treatment, or cancer recurrences

# Sample (n = 126,366)



## Medicare Beneficiaries:

- Aged 65 years or older
- Cancer and non-cancer respondents reside in same SEER region

- 5,593 Prostate (4%)
- 4,311 Female breast (3%)
- 3,012 Colorectal (2%)
- 1,792 non-small cell lung (1%)

n = 22,740 (18%)

n = 103,626 (82%)

# Dependent Variable = SF-6D

- SF-36 health survey, version 1
- 11 of 36 questions representing 6 of 8 domains
  - Physical functioning
  - Role limitations
  - Social function
  - Pain
  - Emotional well-being
  - Energy/fatigue
- Standard gamble elicitation of preferences from a population sample in the UK.
- Scores for those alive range from 0.30 to 1.00 (dead = 0.00).



## Health state 424421 (0.59)

- Your health limits you a lot in moderate activities (such as moving a table, pushing a vacuum cleaner, bowling or playing golf)
- You are limited in the kind of work or other activities as a result of your physical health
- Your health limits your social activities (like visiting friends, relatives etc.) most of the time.
- You have pain that interferes with your normal work (both outside the home and housework) moderately
- You feel tense or downhearted and low a little of the time.
- You have a lot of energy all of the time

# 10 Cancer Conditions (n = 22,740; 18%)

- Prostate cancer (n = 5,593; 4%)
- Female breast Cancer (n = 4,311; 3%)
- Colorectal cancer (n = 3,012; 2%)
- Non-small cell lung cancer (n = 1,792; 1%)
  
- Bladder cancer (n = 1,299; 1%)
- Melanoma (n = 1,135; 1%)
- Endometrial cancer (n = 902; 1%)
- Non-Hodgkin's lymphoma (n = 668; 1%)
- Kidney cancer (n = 488; 0.4%)
  
- Other cancer (n = 3,540; 3%)

Note: Those with more than one cancer diagnosis are excluded.

# Historic Stage of Disease (time of diagnosis)

- Localized
  - 2045 breast, 2652 prostate, 1481 colorectal, 466 lung
- Distant (metastatic)
  - 26 breast, 61 prostate, 48 colorectal, 47 lung
- Unstaged
  - 347 breast, 633 prostate, 203 colorectal, 65 lung

# 13 Non-cancer Conditions (mean number = 2.44)

• Hypertension	n = 66,968	(53%)
• Arthritis of the hip	n = 44,524	(35%)
• Arthritis of the hand	n = 40,402	(32%)
• Sciatica	n = 26,878	(21%)
• Other heart disease	n = 25,455	(20%)
• Diabetes	n = 20,089	(16%)
• Angina/coronary artery disease	n = 18,017	(14%)
• Chronic obstructive pulmonary disease	n = 15,445	(12%)
• Depressed in the last year	n = 14,815	(12%)
• Myocardial infarction/heart attack	n = 11,982	( 9%)
• Stroke	n = 9,479	( 8%)
• Congestive heart failure	n = 7,893	( 6%)
• Inflammatory bowel disease	n = 5,882	( 5%)

Has a doctor ever told you that you had: ...

In the past year, have you felt depressed or sad much of the time?

# Demographic & Administration Variables

- Age (continuous)
- Education (8<sup>th</sup> grade or less; some high school; high school graduate; some college; 4 year college grad; > 4 year college)
- Gender (male; female)
- Income (<10k, 10-19999, 20-29999, 30-39999, 40-49999, 50-79999, 80k and above, don't know or missing)
- Race/ethnicity (Hispanic, non-Hispanic white, black, Asian, American Indian, other race, missing)
- Marital status (married, widowed, divorced/separated/never married)
  
- Proxy completed survey (11%)
- Mode of administration (88% mail vs. 12% phone)

# Sample (n = 126,366)

- 55% female
- 79% non-Hispanic white, 7% Hispanic, 5% Black, 5% Asian
- 60% married
- 58% high school graduate or less
- 51% < \$30,000 income

# Results (1)

- Adjusted R-squared of 39% for 43 dfs
- Intercept = 0.80
  - No chronic condition, average education and age, divorced/separated/never married, white, don't know/missing income, phone mode)
  - SD = 0.14
- Only 2 of 23 conditions had non-significant associations (melanoma, endometrial cancer)

# Results (2)

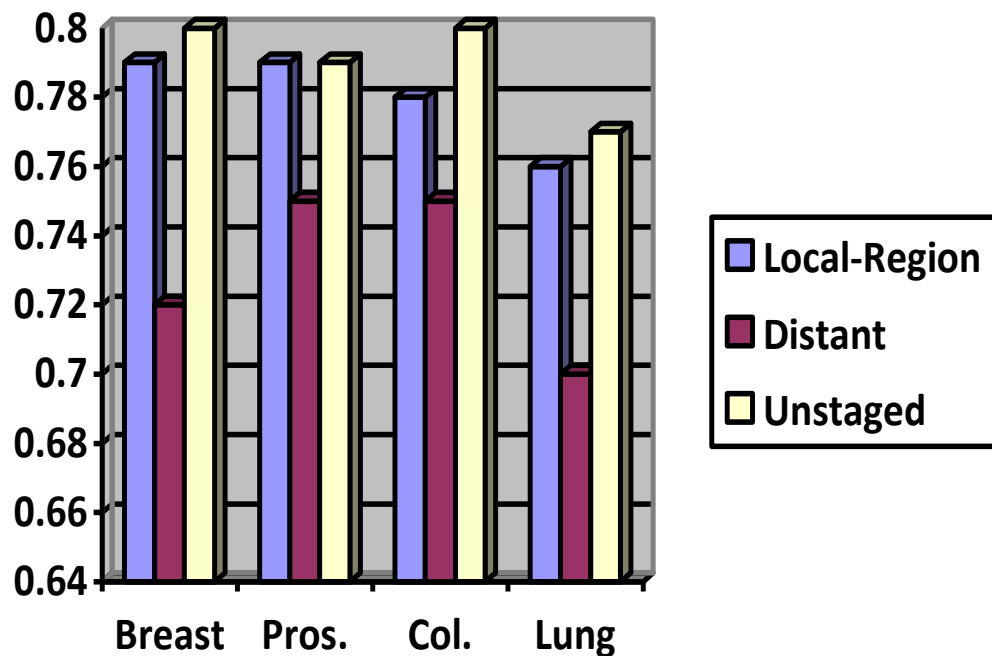
- Adjusted means
  - 0.80 (colorectal cancer, myocardial infarction)
  - 0.79 (bladder cancer, kidney cancer, non-Hodgkin's lymphoma, female breast cancer, prostate cancer, hypertension)
  - 0.78 (non-small cell lung cancer, other cancer, angina/CAD, other heart disease, diabetes, arthritis of the hand)
  - 0.77 (CHF, inflammatory bowel disease)
  - 0.76 (stroke, COPD/asthma, sciatica, arthritis of the hip)
  - 0.67 (depressive symptoms)



# Results (3)

- 52 possible two-way interactions between four most prevalent cancers (female breast, prostate, colorectal, lung) and the 13 non-cancer conditions
  - Only 6 were statistically significant.
  - Two negative interaction coefficients (-0.01)
    - Colorectal cancer and diabetes
    - Lung cancer and COPD/asthma

# Distant stage of cancer associated with 0.05-0.10 lower SF-6D Score



**Figure 1.** Distant Stage of Disease Associated with Worse SF-6D Scores (Sample sizes for local/regional, distant, and unstaged: Breast (2045, 26, 347); Prostate (2652, 61 and 633), Colorectal (1481, 48 and 203), and Lung (466, 47 and 65)).

# Summary

- Unique associations of multiple chronic conditions on health-related quality of life are generally similar and additive, not interactive
- The largest unique associations of chronic conditions with health-related quality of life among Medicare managed care beneficiaries was observed for four conditions
  - Stroke, COPD/asthma, sciatica, arthritis of the hip
- Advanced stage of cancer is associated with noteworthy decrement in health-related quality of life for four “big” cancers (breast, prostate, colorectal, lung)

# Thank you



The adjusted mean decline in the Short Form-36 (version 1) physical component summary scores from baseline to follow-up assessment across the nine cancer types and the control subjects (No Cancer).

