Title: Quality-of-Life Needs Assessment in Patients with Severe Chronic Pancreatitis Using a Validated Instrument

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Statement of the Problem: Chronic pancreatitis (CP) is a chronic disease state with limited management options with pain being the most significant and debilitating symptom. Pain often persists despite therapeutic interventions, thus impacting patients' quality-of-life (QOL). CP patients receiving support of an interdisciplinary palliative care (PC) teammay see marked improvement in QOL.

Background/Literature Review: Limited studies exist measuring QOL in CP patients. One study utilizes the EORTC QOL, a specific assessment tool for pancreatic cancer; another uses the generic psychometric assessment (SF-36) to measure QOL. Although these studies demonstrate decreased QOL, they do not utilize instruments specifically designed for CP patients. The **PAN**creatitis **Q**uality **Of Life** Instrument (PANQOLI) is the first pancreatitis-specific tool validated for QOL evaluation in CP patients.

Purpose/Objectives: Using the PANQOLI, the objective is to conduct a needs assessment for PC as a management option for CP patients ages 18-80 experiencing decreased QOL.

Methods/Measures/Implementation Timeline: The PANQOLI was administered to 33 CP patients before undergoing endoscopic interventions in the Gastrointestinal (GI) clinic at University of Colorado Hospital. Additional post-procedure surveys were administered for comparison via telephone or at follow-up appointments at 1- and 3-months. All PANQOLI survey results were entered into REDCap. Data are divided into four functional domains: physical, role, emotional, and self-worth and summarized using descriptive statistics, test of difference and content analysis.

Findings/Results: The PANQOLI results showed significant improvement at 1-month (p=0.02), however it was not sustained at 3-months. Role functions showed significant improvement at both 1-month (p<0.01) and 3-months (p<0.001). No significant improvement in QOL was seen in the physical, emotional, and self-worth domains at 1- and 3-months.

Conclusion/Practice Implications: The majority of the assessed domains (physical, emotional, selfworth) were not positively impacted in this small, select patient cohort. These findings illustrate the potential need for PC support in managing symptoms compromising QOL.