Depression and survival among head and neck cancer patients

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Scientific outline

Background. Depression has been reported in about 11-20% of head and neck cancer (HNC) patients [1]. Awareness for (symptoms of) depression in clinical practice is of great importance, since it influences quality of life [2] and is highly likely to influence survival as well [3,4]. Two systematic reviews in cancer patients in general found that depressed cancer patients were 17-39% more likely to die than non-depressed cancer patients [3,4]. A recent study among HNC-patients supported these findings [5]. However, more detailed insight into the association between depression and survival is called for.

Methods. All newly-diagnosed HNC-patients treated with curative intent of the Head and Neck 5000 project will be included. Survival analyses will be performed to assess the association between depression (at baseline and 4 and 12-months follow-up) and 2-year disease-specific and overall survival, once without and once with adjustment for confounders. Potential confounders investigated include gender, age, cancer location, stage, treatment, HPV-status, comorbidity, physical functioning and treatment-related side-effects (symptom scales of the EORTC QLQ-C30 and QLQ-H&N35). In addition, the potential mediating effect of lifestyle behaviour (smoking, alcohol use, diet) will be investigated.

Discussion. This study will provide detailed insight into 1) the association between the course of depression and survival in HNC-patients; 2) the adjusted association between depression and survival after adjustment for potential confounding factors, including clinical characteristics and side-effects of cancer and its treatment; and 3) the potential mediating effect of lifestyle behaviour.