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Title: Impact of indwelling pleural catheter on quality of life in management of malignant pleural effusion in patients with advanced malignancies

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Body: Study objective: Malignant pleural effusion (MPE) is a common complication of some advanced malignancies with an important negative impact on symptoms and quality of life (QoL). Indwelling pleural catheter (IPC) is useful for controlling symptoms due to relapsed MPE. There are scarce data about its impact on QoL in patients with advanced malignancies. We aimed to assess the QoL along time in patients with diagnosis of recurrent MPE and IPC. Design and methods: A prospective multicentric observational study was performed in five university hospitals in Spain from September 2010 to September 2011. Patients included must have a histological-confirmed advanced malignancy and a diagnosis of MPE. QoL was assessed by the scale of the EORTC QLQ30. Three timing cut-off points were considered: previous insertion of pleural catheter (baseline), at 30 days and at 60 days after insertion. Results: 52 patients with MPE (median age 66 years; 30 male) were included. Most frequent symptoms at study entrance were dyspnea(100%), chest pain(42%) and cough(44%). 52 patients completed baseline QoL questionnaire, 29 at 30 days and 16 at 60 days. At timing cut-off points of 30 days, QoL scales showed a significant improvement in symptoms severity and a non-significant trend to improve the global and functional scores.

Scale	Baseline (n 28)	30 days (n 28)	p value*
Global	33(17-65)	50(33-65)	0.09

Functional	48(33-79)	66(35-81)	0.07
Symptoms	39(23-63)	32(16-46)	0.02

Data are expressed as median (25th to 75th percentile); * t-student for related samples

Conclusions: IPC is a useful tool that increases QoL in the palliative management of advanced malignancies with MPE.