

PSYCHOTROPIC AND STIMULANT MEDICATION (PSM) USE AMONG TESTICULAR CANCER SURVIVORS (TCS): A MULTI-INSTITUTIONAL CLINICAL STUDY OF 680 PATIENTS GIVEN CISPLATIN-BASED CHEMOTHERAPY (CHEM) (NCI 1R01 CA157823-02) *MASCC/ISOO 2015. (POSTER BOARD NO. 24-14-P)*

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### Introduction

TCS are known to be at increased risk for acute and chronic medical conditions, but few studies have examined barometers of their psychological health.

### Objectives

To characterize the prevalence of PSM use and associations with demographics, health behaviors, and treatment-associated toxicities among TCS.

### Methods

TCS aged  $\leq 49$  years at first-line CHEM completed a questionnaire regarding co-morbidities and prescription drug use, including PSMs. For co-morbidities, peripheral neuropathy (PN) responses of 'a little', "quite a bit", or "very much" were scored 'yes.' Fisher's exact test was used to examine the significance of various associations.

### Results

Among the first 680 consecutively enrolled TCS, median age at TC diagnosis was 31y (range, 15-49y) and median time since CHEM completion was 52mo (range 12-360mo). 85 TCS (12.5%) reported PSM use, including antidepressants (N=65 [76.5%]), anxiolytics (N=23 [27%]), and stimulants (N=21 [25%]) with 20 TCS on  $\geq 2$  PSMs (23%). Compared to non-users, more PSM users were unemployed (11.8% vs. 4.4%;  $P < .01$ ), self-rated their health as fair/poor (12.2% vs 4%;  $P < .01$ ), and had gained  $> 20$ lb since CHEM (39.8% vs 23.4%;  $P < .01$ ). PSM users were more likely to have tinnitus (49.4% vs. 36.4%;  $P < 0.04$ ), both tinnitus and PN (43.5% vs. 27.2%;  $P < 0.01$ ), cardiovascular disease (26.2% vs. 15.6%;  $P < .02$ ), and greater use of prescription medications for pain control (20% vs. 4.7%;  $P < 0.01$ ), hypertension (16.5% vs. 7.1%;  $P < 0.01$ ), diabetes (8.3% vs. 2.9%;  $P < 0.02$ ), and testosterone replacement (10.6% vs. 5.0%;  $P = 0.048$ ).

### Conclusions

Future studies should aim for identification of high-risk patients in need of intensified preventive and therapeutic interventions.