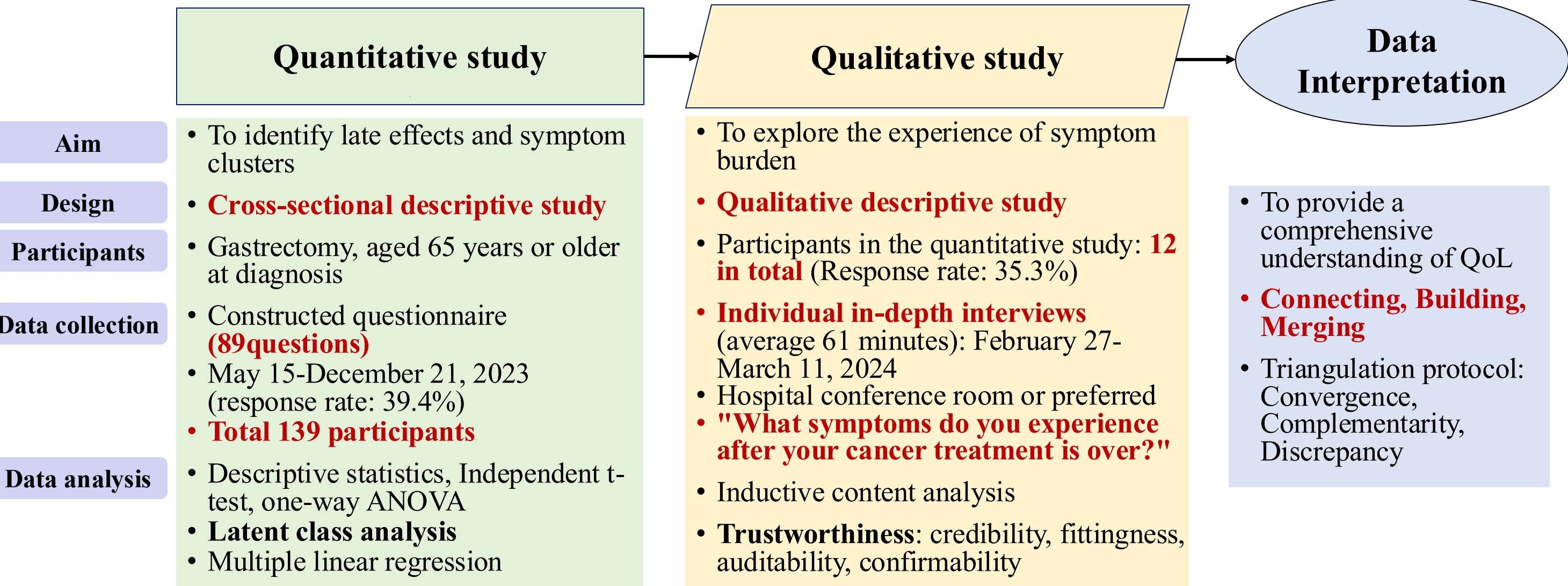


BACKGROUND

- **Gastric cancer** has a high incidence and mortality rate worldwide, and more than 55.2% of gastric cancer survivors are older adults. These older survivors face increased comorbidities, high societal healthcare costs, and decreased health-related quality of life (QoL).
- **Late effects** of cancer and its treatment, which are chronic conditions, contribute to the low QoL reported by survivors even after treatment ends. Identifying **symptom clusters**, where two or more symptoms co-occur, is important for effective interventions.
- Previous studies have focused on adult cancer survivors or single late effects, limiting our understanding of comprehensive late effects in older gastric cancer survivors.
- To **explore late effects, symptom clusters, symptom burden**, and their impact on **QoL** in **older gastric cancer survivors** using a mixed methods approach based on **theory of unpleasant symptom**.

METHODS

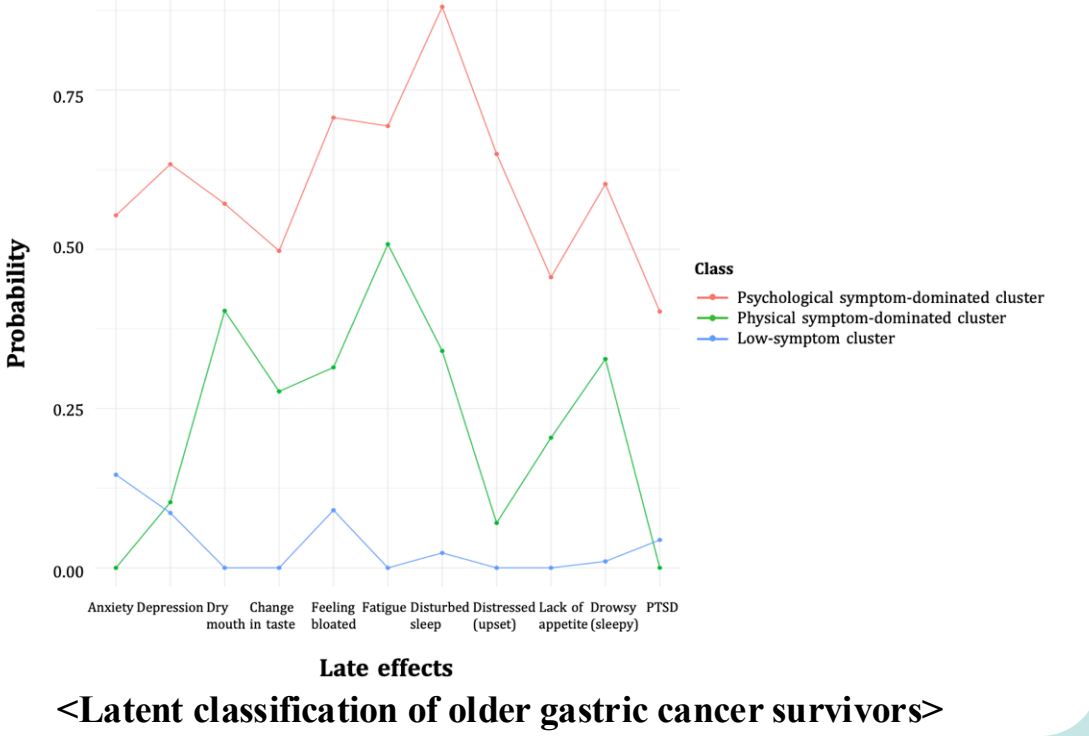
- Research design: **Explanatory sequential design of mixed methods research**



RESULTS

1. Quantitative study

- The mean age was **73.3 years**. mean postoperative survival was **60.7 months**. 81% were diagnosed with cancer **stage Ia**.
- The **emotional/informational support was the lowest**. **38.3%** reported **clinically significant fear of cancer recurrence**.
- **Physical QoL was lower at 28.1%** and **psychological QoL at 15.7%** compared to the general population. The most common moderate to severe late effects were **fatigue, feeling bloated, disturbed sleep, dry mouth, and drowsy**.
- Symptom clusters were categorized into **“low-symptom cluster,” “physical symptom-dominated cluster,”** and **“psychological symptom-dominated cluster.”**



<Latent classification of older gastric cancer survivors>

RESULTS(cont'd)

1. Quantitative study (cont'd)

- **Factors that negatively impacted QoL** included **daily performance of functions, fear of cancer recurrence, and both physical and psychological symptom clusters**, while **positive factors** included a **longer postoperative period** and **higher social support**.

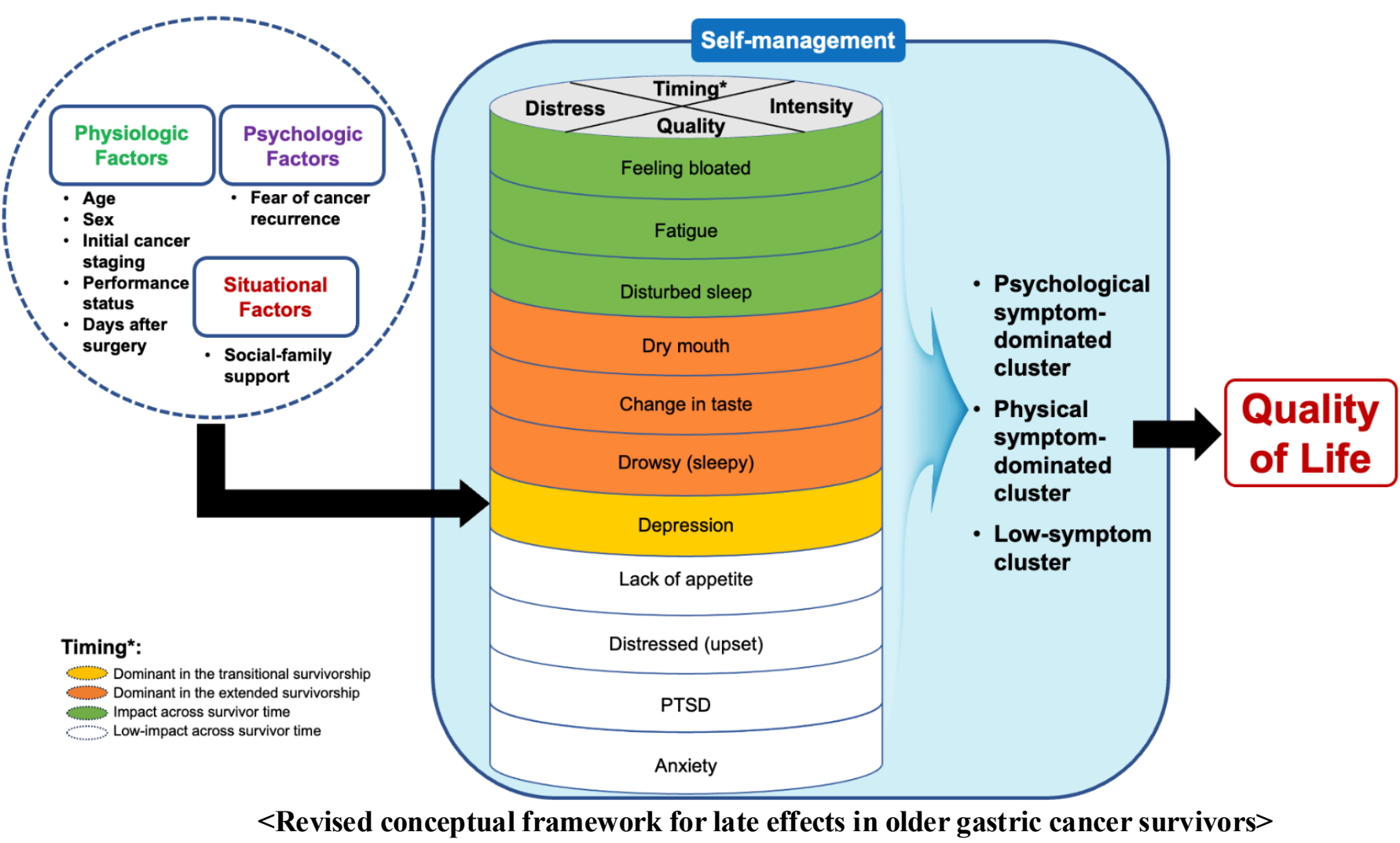
2. Qualitative study

- Participants: 65–81 years. a mean postoperative duration of 29.4 months. 8 in the physical symptom-dominated cluster, 4 in the psychological symptom-dominated cluster.
<Experience of late effects in older gastric cancer survivors >

Categories	Subcategories
Not the same as before surgery with mixed discomfort	<ul style="list-style-type: none">• Uncomfortable with symptoms related to eating• Living with a variety of symptoms• Withdrawn after surgery• Waiting for time to pass without problems• Psychological symptom-dominated clusters are more of a struggle
Actively managing symptoms after surgery	<ul style="list-style-type: none">• Initiating efforts to live a healthy life after surgery• Managing health on my own without guidance• Being supported by others

3. Integrate quantitative and qualitative data

- Integration identified 5 themes and 13 subthemes, including
 - ✓ **maturation effects over time after surgery**
 - ✓ **fear of cancer recurrence has different affects individually**
 - ✓ **influence of social and family support**
 - ✓ **experiencing the combined late effects associated with older age, cancer, and gastrectomy**
 - ✓ **QoL with endeavor and endurance**



<Revised conceptual framework for late effects in older gastric cancer survivors>

CONCLUSIONS

- The findings highlighted the **distinct characteristics of symptom clusters** according to **survival stage** and **the need for psychological symptom management**.
- The study supports the **potential effectiveness of self-management interventions for late effects** and holds promise for **improving the QoL of older gastric cancer survivors** and **reducing societal healthcare costs**.