Abstract # 1213

An Examination of Health Literacy Amongst Patients with Chronic Lymphocytic Leukemia - A study from The Lymphoma Coalition Global Patient Survey 2022 Steve E. Kalloger¹, Shawn Sajkowski¹, Amanda Watson¹, & Lorna Warwick² LYMPHOMA 33 ¹Department of Research & Information, Lymphoma Coalition, Mississauga, ON, Canada; ² Management, Lymphoma Coalition, Mississauga, ON, Canada COALITION

Introduction

borders. Health literacy is a key aspect of efficient and meaningful literacy.

Fisher's Exact Test as appropriate.



Figure 1. Rate of comprehension for the 9 terms examined in the Lymphoma Coalition Global Patient Survey (2022). These items are ranked from highest to lowest levels of comprehension.

than one relapse respectively. The frequencies of Figure 10. Rate of comprehension for the term 'No Evidence of Disease (NED)' examined in the LC's comprehension across the 9 terms are shown in Figure 1. GPS (2022) across geographic regions. NOTE: Middle East & Africa and South America have low esponse rates and the estimates should be interpreted with caution.





Europe (n=488)
Asia-Pacific (n=118)
North America (n=58)
South America (n=1)

The examination of associations with core demographics demonstrated that females had significantly better comprehension than males for the terms: Progressive Disease (OR =1.7 [95%CI = 1.1 - 2.7]); Clonal Evolution (OR = 1.5 [95%CI = 1.1 - 2.1]); and Minimal Residual Disease (MRD) (OR = 1.5 [95%Cl = 1.03 - 1.9]). Receiving post-secondary or higher education resulted in increased comprehension of: Treatment Duration, Minimal Residual Disease (MRD), and Indolent Disease (p <= 0.008). Examination of Household Status, Age and Area of Residence revealed very mild associations with comprehension of the terms of interest. Regional differences did exist and are displayed in Figures 2-10, with North America having an average rate of comprehension across the 9 terms of 72.8% followed by Europe and Asia-Pacific with 69.8% and 65.2% respectively.

The results suggest that there is significant heterogeneity in the comprehension of terms common to the CLL experience. While it can be expected that terms such as Treatment Duration and Stable Disease exhibit almost universal understanding, the lack of familiarity with the last five terms in Figure 1 may indicate a blind spot with regard to awareness of the long term prognosis of the disease. While it is difficult to say whether this stems from the patient not wanting to know or from the primary lymphoma care provider actively withholding such information or not using the same terminology, a lack of comprehension will make shared decision making more challenging. As expected, those with higher educational levels exhibited improved comprehension. Surprisingly, although we expected to find no differences, females exhibited increased comprehension relative to males for a number of terms. Overall, these results suggest that there is room for improvement in health literacy for patients with CLL- especially for factors that can influence prognosis of their disease. We feel that good health literacy is one of the necessary components patients should possess in order to facilitate increased participation in their care.

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Results (Contd)

Conclusion

Contact information

For further details on the LC 2022 GPS, please scan the QR code or visit https://lymphomacoalition.org/global-patient-survey/

