

SCORING INSTRUCTIONS (Version 2.0 14th April 2021)

Measure of Ovarian cancer Symptoms and Treatment concerns: MOST-T35 (MOST v1) & MOST-T24 (MOST v2)

These scoring instructions apply to two versions of the MOST:

- MOST-T35 (MOST v1) (King et al. 2014) contains 35 items, including symptoms, well-being and other problems that may be associated with treatment;
- MOST-T24 (MOST v2) (King et al. 2018) contains 24 of the original 35 items, focusing on symptoms (21 items) and well-being (3 items).

Because these two versions contain different numbers of items, and because the numbering of specific items differs, it is very important first to determine whether the data you are scoring was collected with MOST-T35 or MOST-T24. Copies of each version are appended so you can cross-check the item numbers with those in order to correctly score the five multi-item indexes (as listed in the table below).

A key requirement for using the MOST to generate endpoint data in clinical trials is to have scoring rules yielding patient-reported scales that are sensitive to both improvement (symptom benefit) and deterioration (burden of treatment and/or progression of disease). As explained in King et al 2018, this is achieved by scoring the 24 items of MOST-T24 into five indexes (as listed in the table below). If you have used MOST-T35 in your study, you can still score these five indexes; you will also have 11 remaining items which can be reported as single items if they are relevant to your study. Each of the 24 items in MOST-T24 can also be reported individually if that is informative to interpreting your study results.

Table: MOST multi-item indexes

MOST indexes Number of items: specific items	MOST-T35(v1) item (#)	MOST-T24(v2) item (#)
MOST-Abdo: <i>Physical symptoms most likely due to recurrent ovarian cancer and not chemotherapy</i> <u>2 items:</u> Abdominal pain, discomfort and/or cramps; Abdominal swelling, bloating and/or fullness	4, 5	1, 2
MOST-DorT: <i>Physical symptoms reasonably likely due to recurrent ovarian cancer and/or chemotherapy</i> <u>11 items:</u> Fatigue (tiredness), Trouble eating, Indigestion, Nausea, Vomiting, Diarrhoea, Constipation, Bladder problems, Shortness of breath, Trouble sleeping, Difficulty swallowing	2, 6, 7, 8, 9, 10, 11, 12, 13, 15, 21	3, 4, 5, 6, 7, 8, 9, 10, 11, 12, 13
MOST-Chemo: <i>Physical symptoms most likely due to chemotherapy and not recurrent ovarian cancer</i> <u>6 items:</u> Altered sense of taste, Sore mouth or throat, Hair loss, Skin rash, Numbness or pins and needles, Sore hands and feet	19, 20, 23, 24, 25, 26	17, 18, 19, 20, 21, 22
MOST-Psych: <i>Psychological symptoms</i> <u>2 items:</u> Anxiety (feeling worried), Depression (feeling sad)	32, 33	23, 24
MOST-Well-being <u>3 items:</u> Physical well-being, Emotional well-being, Overall well-being	16, 17, 18	14, 15, 16

Single items

The prevalence of each MOST item at assessment time points can be summarized by providing the mean, standard deviation and proportions based on the MOST response format, a numeric rating scale with integers from zero to 10, with five verbal anchors: 'No trouble at all' (0), 'Mild' (1–3), 'Moderate' (4–6), 'Severe' (7–10), and 'Worst I can imagine' (10). For an example see *Figure 2* in King et al 2018.

Multi-item indexes

Each of the five MOST indexes is scored by taking the average of the component items, with linear rescaling to an observable range of 0–100, with higher scores representing worse symptoms (for MOST-Abdo, MOST-Chemo, MOST-DorT, MOST-Psych), and better wellbeing (for MOST-Well-being). The five multi-item indexes are scored as follows:

For all multi-item indexes, except the MOST-well-being index, compute the average of the component items (range 0-10) and then multiply this score by 10 (0-100 range). Thus, a higher score is equal to higher symptom burden.

To calculate the MOST-Well-being index, repeat these same steps (i.e. take the average of the component items and multiply this score by 10) and then subtract this score from 100 so that a higher score is equal to greater well-being. For example, if a patient scores 4, 5, & 8 on the three component items of the MOST Well-being scale you would begin by computing the average of these scores (= 5.67), multiplying it by 10 (= 56.67), and would then subtract this score from 100 (= 43.33).

References

King MT, Stockler MR, Butow P, O'Connell R, Voysey M, Oza AM, Gillies K, Donovan HS, Mercieca-Bebber R, Martyn J, Sjoquist K, Symptom Benefit Study Group and Friedlander ML. Development of the Measure of Ovarian Symptoms and Treatment concerns (MOST): aiming for optimal measurement of patient reported symptom benefit with chemotherapy for symptomatic ovarian cancer. *International Journal of Gynecological Cancer*. 2014; 24(5): 875-873.

King MT, Stockler MR, O'Connell RL, Buizen, L, Joly F, Lanceley A, Hilpert F, Okamoto A, Aotani E, Bryce J, Donnellan P, Oza A, Avall-Lundqvist E, Berek JS, Sehouli J, Feeney M, Berton-Rigaud D, Costa DSJ, Friedlander ML for the GCG Symptom Benefit group. Measuring what matters MOST: validation of the Measure of Ovarian Symptoms and Treatment, a patient-reported outcome measure of symptom burden and impact of chemotherapy in recurrent ovarian cancer. *Quality of Life Research*, 2018; 27(1): 59-74.

Measure of Ovarian cancer Symptoms and Treatment concerns - MOST-T35 (MOST v1)

Patient's initials:
 Study no.
 Current date:

D D
M M
Y Y

Please **circle** one number for each line to best show **how much that aspect troubled you** on average **during the last 3 to 4 weeks.**

	No trouble at all		Mild		Moderate		Severe		Worst I can imagine		
1. Pain (all and anywhere)	0	1	2	3	4	5	6	7	8	9	10
2. Fatigue (tiredness)	0	1	2	3	4	5	6	7	8	9	10
3. Poor appetite (or feeling full quickly)	0	1	2	3	4	5	6	7	8	9	10
4. Abdominal pain, discomfort and/or cramps	0	1	2	3	4	5	6	7	8	9	10
5. Abdominal swelling, bloating and/or fullness	0	1	2	3	4	5	6	7	8	9	10
6. Trouble eating	0	1	2	3	4	5	6	7	8	9	10
7. Indigestion	0	1	2	3	4	5	6	7	8	9	10
8. Nausea	0	1	2	3	4	5	6	7	8	9	10
9. Vomiting	0	1	2	3	4	5	6	7	8	9	10
10. Diarrhoea	0	1	2	3	4	5	6	7	8	9	10
11. Constipation	0	1	2	3	4	5	6	7	8	9	10
12. Bladder problems	0	1	2	3	4	5	6	7	8	9	10
13. Shortness of breath	0	1	2	3	4	5	6	7	8	9	10
14. Leg swelling	0	1	2	3	4	5	6	7	8	9	10
15. Trouble sleeping	0	1	2	3	4	5	6	7	8	9	10

Please **circle** one number for each line to show how you would have rated yourself on that aspect on average **during the last 3 to 4 weeks.**

	Best possible	Very good		Good		Fair		Poor		Very poor	Worst possible
16. Physical well-being	10	9	8	7	6	5	4	3	2	1	0
17. Emotional well-being	10	9	8	7	6	5	4	3	2	1	0
18. Overall well-being	10	9	8	7	6	5	4	3	2	1	0

Measure of Ovarian cancer Symptoms and Treatment concerns - MOST-T35 (MOST v1)

Patient's initials:
 Study no.
 Current date:

D D
M M
Y Y

Please **circle** one number for each line to best show **how much that aspect troubled you on average during the last 3 to 4 weeks.**

	No trouble at all	Mild							Severe			Worst I can imagine
	0	1	2	3	4	5	6	7	8	9	10	
19. Altered sense of taste	0	1	2	3	4	5	6	7	8	9	10	
20. Sore mouth or throat	0	1	2	3	4	5	6	7	8	9	10	
21. Difficulty swallowing	0	1	2	3	4	5	6	7	8	9	10	
22. Loss of appetite	0	1	2	3	4	5	6	7	8	9	10	
23. Hair loss	0	1	2	3	4	5	6	7	8	9	10	
24. Skin rash	0	1	2	3	4	5	6	7	8	9	10	
25. Numbness or pins and needles	0	1	2	3	4	5	6	7	8	9	10	
26. Sore hands and feet	0	1	2	3	4	5	6	7	8	9	10	
27. Problems taking tablets	0	1	2	3	4	5	6	7	8	9	10	
28. Problems with needles or Injections	0	1	2	3	4	5	6	7	8	9	10	
29. Inconvenience of treatment	0	1	2	3	4	5	6	7	8	9	10	
30. Thought of actually having treatment	0	1	2	3	4	5	6	7	8	9	10	
31. Trouble concentrating	0	1	2	3	4	5	6	7	8	9	10	
32. Anxiety (feeling worried)	0	1	2	3	4	5	6	7	8	9	10	
33. Depression (feeling sad)	0	1	2	3	4	5	6	7	8	9	10	
34. Problems doing what I wanted	0	1	2	3	4	5	6	7	8	9	10	
35. Problems for my family or friends	0	1	2	3	4	5	6	7	8	9	10	

Thank you for completing this questionnaire

Measure of Ovarian cancer Symptoms and Treatment concerns – MOST-T24 (MOST v2)

Patient's initials: Study no. Current date:

D D M M Y Y

Please **circle** one number for each line to best show **how much that aspect troubled you** on average during the last 3 to 4 weeks.

	No trouble at all	Mild			Moderate			Severe			Worst I can imagine
1. Abdominal pain, discomfort and/or cramps	0	1	2	3	4	5	6	7	8	9	10
2. Abdominal swelling, bloating and/or fullness	0	1	2	3	4	5	6	7	8	9	10
3. Indigestion	0	1	2	3	4	5	6	7	8	9	10
4. Trouble eating	0	1	2	3	4	5	6	7	8	9	10
5. Difficulty swallowing	0	1	2	3	4	5	6	7	8	9	10
6. Diarrhoea	0	1	2	3	4	5	6	7	8	9	10
7. Constipation	0	1	2	3	4	5	6	7	8	9	10
8. Shortness of breath	0	1	2	3	4	5	6	7	8	9	10
9. Nausea	0	1	2	3	4	5	6	7	8	9	10
10. Vomiting	0	1	2	3	4	5	6	7	8	9	10
11. Trouble sleeping	0	1	2	3	4	5	6	7	8	9	10
12. Fatigue (tiredness)	0	1	2	3	4	5	6	7	8	9	10
13. Bladder problems	0	1	2	3	4	5	6	7	8	9	10

Please **circle** one number for each line to show how you would have rated yourself on that aspect on average during the last 3 to 4 weeks.

	Best possible	Very good	Good	Fair	Poor	Very poor	Worst possible				
14. Physical well-being	10	9	8	7	6	5	4	3	2	1	0
15. Emotional well-being	10	9	8	7	6	5	4	3	2	1	0
16. Overall well-being	10	9	8	7	6	5	4	3	2	1	0

Measure of Ovarian cancer Symptoms and Treatment concerns - MOST-T24 (MOST v2)

Patient's initials: Study no. Current date:

D D M M Y Y

Please **circle** one number for each line to best show **how much that aspect troubled you** on average **during the last 3 to 4 weeks.**

	No trouble at all	Mild			Moderate			Severe		Worst I can imagine	
	0	1	2	3	4	5	6	7	8	9	10
17. Altered sense of taste	0	1	2	3	4	5	6	7	8	9	10
18. Sore mouth or throat	0	1	2	3	4	5	6	7	8	9	10
19. Hair loss	0	1	2	3	4	5	6	7	8	9	10
20. Skin rash	0	1	2	3	4	5	6	7	8	9	10
21. Numbness or pins and needles	0	1	2	3	4	5	6	7	8	9	10
22. Sore hands and feet	0	1	2	3	4	5	6	7	8	9	10
23. Anxiety (feeling worried)	0	1	2	3	4	5	6	7	8	9	10
24. Depression (feeling sad)	0	1	2	3	4	5	6	7	8	9	10

Thank you for completing this questionnaire

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