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UTILITY SCORES TO ASSESS QUALITY OF LIFE (QOL) IN PREVALENT HAEMODIALYSIS (HD) PATIENTS.

BACKGROUND & AIM

As chronic illness and comorbidity progressively replace acute life threatening disease, **QoL** is becoming an **increasingly important parameter** for evaluation of **quality of health care**. Different scoring systems are available:

• **Scoring systems:**

- Overall QOL vs. health related QOL
- Generic vs. Disease specific instruments

• **Questionnaires:**

- **EuroQoL (EQ5D):** allows calculating quality adjusted life years, as often used in health economic analysis.
- **Patient Reported Outcomes Measurements Information System (PROMIS):** allows comparison of a population to different reference populations.

Study Aim

We intended to assess EQ5D and PROMIS-29 in prevalent haemodialysis patients to assess QoL as compared to the general population and evaluate their concordance.

METHOD

Patients (N=121)

- 74 males
- Age: 67.7 ± 15.8
- Hospital, satellite and home dialysis units
- Haemoglobin: 11.4±1.3g/dl

Questionnaires

➢ **PROMIS-29**

Anxiety
Depression
Fatigue
Pain interference
Physical function
Sleep disturbance
Satisfaction with participation in social roles
Ability to participate in social roles and activities

➢ **EQ5D**

Mobility
Self-care
Usual activities
Pain/discomfort
Anxiety/depression
Visual analogue scale (VAS): self-rated health

➢ **7 point Likert scale**

Patient's health as compared to age matched population
QoL at the specific day of the interview



- Patients were **surveyed** by trained nurses to avoid selection bias
- Data were collected and stored centrally using **Survey-Monkey**.

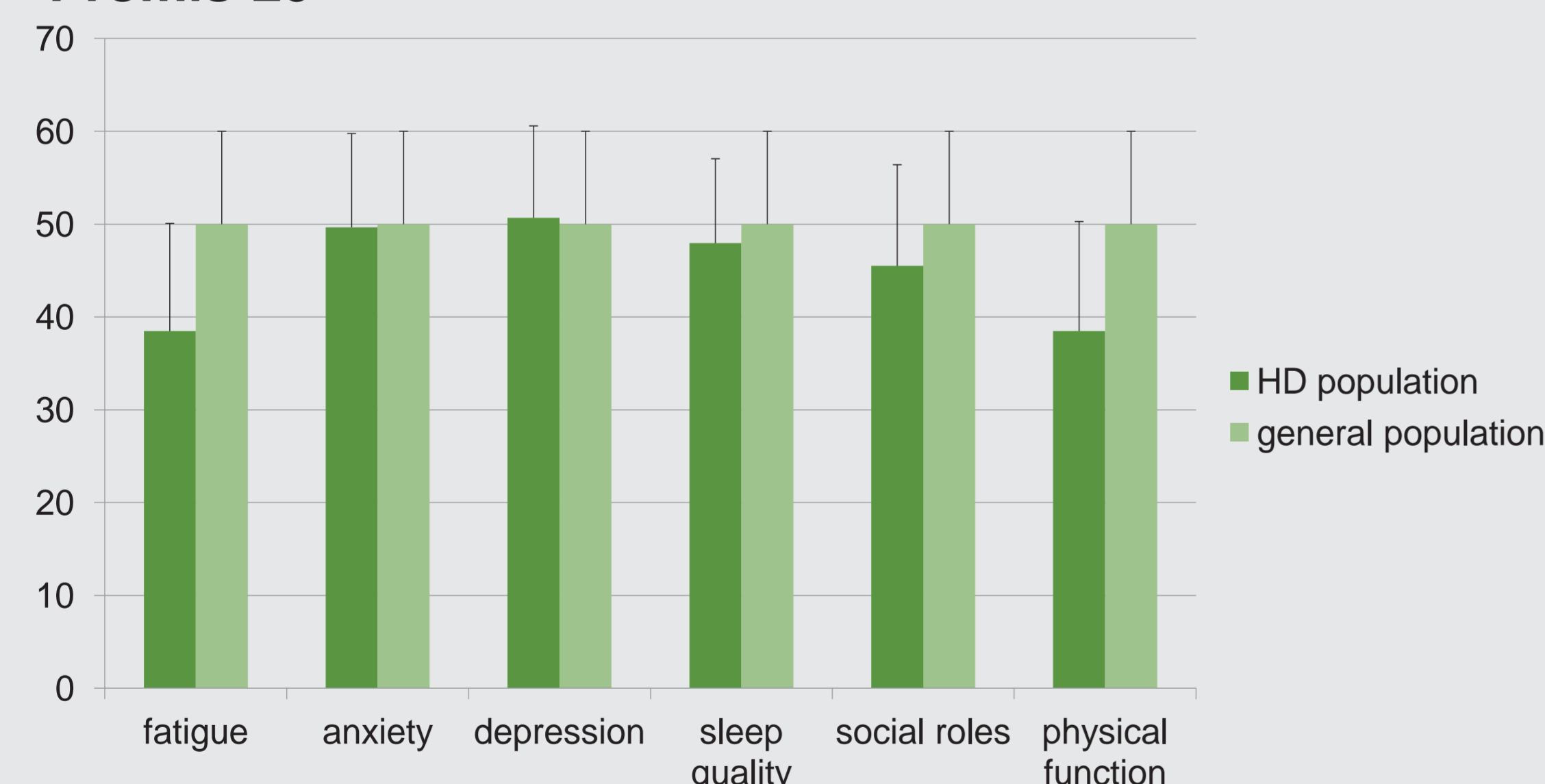
RESULTS

EQ5D results

	Small or no problem (%)	Moderate problem (%)	Severe problem (%)
Mobility	39.7	55.4	5.0
Self care	59.5	27.3	13.2
Usual activities	43.8	38.8	17.4
Pain/discomfort	0	49.6	50.4
Anxiety/depression	76.0	22.3	1.7

- EQ5D utility index (range:0-1): 0.44±0.26
- Health compared to age matched population: 4.65±1.36
- QoL at the specific day of the interview: 4.82±1.45
- EQ5D VAS (range 0-100): 61.3±16.2

Promis-29



Correlation domain scores in Promis-29 versus EQ5D utility index

Domain	correlation
➢ Physical function	0.28 (P=0.002)
➢ Fatigue	0.14 (NS)
➢ Social role	-0.08 (NS)
➢ Anxiety	0.14 (NS)
➢ Depression	0.08 (NS)
➢ Sleep	0.14 (NS)
➢ QoL	0.12 (NS)
➢ Health as compared to age matched population	0.08 (NS)

NS: not significant.

CONCLUSION

- Reported **EQ5D utility** in this population of prevalent HD patients is low.
- **No correlation** between the subjective scores of HR and EQ5D utility index.
- Both **physical function (PROMIS-29)** and **mobility (EQ5D)** are problematic.
- **Anxiety** and **depression** are comparable to the general population.



It can be hypothesised that **patients develop coping mechanisms** to adapt to their new disease state.