

New approach performs well for measuring CKD quality of life

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(HealthDay)—A new chronic kidney disease (CKD) measure of quality



of life (QOL) and a single-score summary for the Kidney Disease Quality of Life-36 (KDQOL-36) are both reliable for assessing patient-reported outcomes and quality of life, according to two studies published online March 21 in the *Journal of the American Society of Nephrology*.

John E. Ware Jr., Ph.D., from the John Ware Research Group in Worchester, Massachusetts, and colleagues compared a new CKD-specific QOL impact scale (CKD-QOL) with KDQOL-36 forms and the generic Short Form-12v2 Health Survey (SF12v2) among 145 patients in different treatment groups (nondialysis stages 3 to 5, on dialysis, or posttransplant). The researchers found that compared with the generic SF-12v2 measures, KDQOL-36 and CKD-QOL measures generally discriminated better. Across four CKD-specific tests, the pattern of comparative results favored CKD-QOL over KDQOL-36 scales.

John D. Peipert, Ph.D., from the Northwestern University Feinberg School of Medicine in Chicago, and colleagues made efforts to simplify interpretation of KDQOL-36 scores by developing a composite score (the KDQOL-36 Summary Score [KSS]) for the kidney-targeted KDQOL-36 scales (Burdens of Kidney Disease, Symptoms and Problems of Kidney Disease, and Effects of Kidney Disease) using a sample of 58,851 dialysis patients participating in the KDQOL Complete program and 443,947 patients from the United States Renal Data System. The confirmatory factor analysis (CFA) model fit was evaluated. The researchers found that a bifactor CFA model fit the data well and supported the KSS ($\alpha = 0.91$).

"There is opportunity for increased application of patient-reported outcomes to improve clinical monitoring of patients' health and treatment evaluation in end-stage kidney disease," write the authors of an accompanying editorial.

One author from the Ware study disclosed financial ties to the



<u>pharmaceutical industry</u> and reported development of CKD-QOL measures.

More information: Abstract/Full Text - Ware (subscription or payment may be required)

Abstract/Full Text - Peipert (subscription or payment may be required)

Editorial

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