EQ-5D (EuroQoL-5 Dimension health survey)

Instrument for measuring HRQOL.

It consists of a 5-dimensional questionnaire measuring mobility, selfcare, usual activities, pain/discomfort, and anxiety/depression. Every dimension can be scored using 3 levels: no problem, some or moderate problems, and extreme problems, corresponding to a score. This gives 243 different health status combinations that can be converted into an index value.

The value is based on data generated from a national general public survey using the time-trade-off (TTO) method to elicit mean TTO values to each health state. Since there is no Swedish TTO tariff for EQ-5D health states, the UK EQ-5D index tariff was used.

EQ-5D also contains a visual analog scale (EQ-VAS) with which patients can rate their HRQOL from 0 to 100, where 0 is the worst imaginable health state and 100 the best imaginable health state. Improvement is defined as a gain of 0.05 index points or 10 points on EQ-VAS.

http://www.euroqol.org/about-eq-5d.html

The European Quality of Life Questionnaire 5 level version (EQ-5D-5L) is a recently updated instrument to assess Health-Related Quality of Life (HRQoL) that has not been validated extensively.

The EQ-5D-3L essentially consists of 2 pages - the EQ-5D descriptive system (page 2) and the EQ visual analogue scale (EQ VAS) (page 3). The EQ-5D-3L descriptive system comprises the following 5 dimensions: mobility, self-care, usual activities, pain/discomfort and anxiety/depression. Each dimension has 3 levels: no problems, some problems, extreme problems.

http://www.euroqol.org/about-eq-5d/how-to-use-eq-5d.html

Parkinson's disease

In a Cross-sectional study, consecutive Mexican subjects with Parkinson's disease. HRQoL was assessed using the EQ-5D-5L and the PDQ-8. Validity of the EQ-5D-5L was assessed determining its association with clinical ratings of disease severity, as well as correlation with PDQ-8. Additionally, performance was evaluated along predefined groups based on clinical and demographic data of known determinants of quality of life.

A total of 585 patients were included for this study. A strong correlation was found between EQ-5D-5L index and PDQ 8 index (Spearman's correlation coefficient=-0.75; p<0.001). Correlation between EQ-5D-5L index and PDQ-8 index remained strong (-0.60 to -0.78; p values <0.001) through all predefined groups. EQ-5D-5L scored higher in those patients with dyskinesia, wearing off, freezing, postural instability, cognitive impairment or depressive mood (p values <0.001).

The EQ-5D-5L is a valid instrument for evaluating HRQoL in PD, performing adequately irrespective of heterogeneous clinical and demographic characteristics, and showing to be sensitive to features of advanced disease and treatment complications ¹⁾.

Metastatic spine disease

The Spine Oncology Study Group Outcome Questionnaire (SOSG-OQ) is superior to the EQ-5D in terms of coverage and internal consistency, but consists of more questions².

1)

Alvarado-Bolaños A, Cervantes-Arriaga A, Rodríguez-Violante M, Llorens-Arenas R, Calderón-Fajardo H, Millán-Cepeda R, Leal-Ortega R, Estrada-Bellmann I, Zuñiga-Ramírez C. Convergent validation of EQ-5D-5L in patients with Parkinson's disease. J Neurol Sci. 2015 Aug 7. pii: S0022-510X(15)00503-1. doi: 10.1016/j.jns.2015.08.010. [Epub ahead of print] PubMed PMID: 26276513.

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