

HEALTH-RELATED QUALITY OF LIFE IN SARCOPENIA: CONTENT VALIDITY OF THE SARQOL QUESTIONNAIRE

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SarQoL
Sarcopenia and Quality of Life

Introduction

Sarcopenia

Low muscle mass and muscle strength - poor physical performance

Sarcopenia & quality of life

Effect of sarcopenia on quality of life (QoL)

Only generic tools

Until 2013, only generic tools (e.g., SF-36, EQ-5D) to assess the quality of life in sarcopenic people

 Need for a PROM, specific tool with greater validity, credibility and responsiveness → SarQoL (Sarcopenia & Quality of Life)

Introduction

SarQoL

- A list of 55 items integrated into 22 questions
- Covering 7 dimensions of QoL: physical and mental health, locomotion, body composition, functionality, activities of daily living, leisure activities and fears.

Worldwide use

Available in more than 30 languages

Content validity

New guideline since 2013 : content validity (COSMIN).

Content validity: relevance and understanding of the target population in a specific context

Objective

To fill the gap to provide a complete assessment of content validity of SarQoL by conducting qualitative interviews with experts and patients suffering from sarcopenia.

Methods

Qualitative interviews

- ✓ 17 sarcopenic patients older than 65 years old
- ✓ 11 experts with clinical and/or research experience

Content validity

- ✓ **Comprehensiveness:** spontaneous elicitation of the concepts associated with QoL
- ✓ **Relevance :** experimentation of the dimensions
- ✓ **Comprehensibility :** understanding of the instructions and questions.

Thematic framework

Based on the seven dimensions originally established in the SarQoL questionnaire.

Results

Data saturation

Comprehensiveness :

Comprehensiveness: 6/7 dimensions elicited by patients and experts, emergence of two new dimensions 'patient empowerment' and 'depression'.

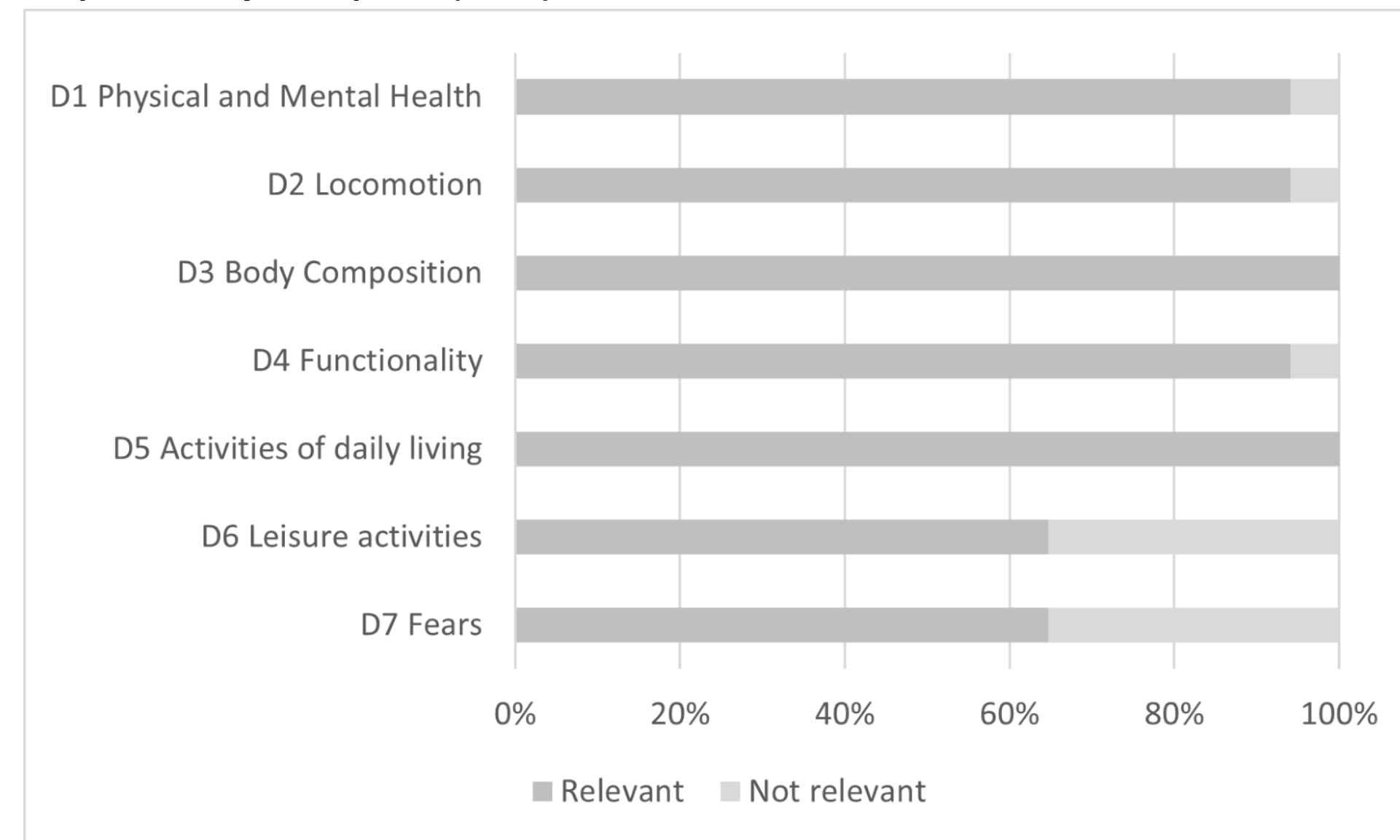
Relevance :

7/7 dimensions assessed as relevant by patients and experts.

Comprehensibility:

High.

Proportion of patients reporting SarQoL dimensions as relevant to their experience of sarcopenia (n=17)



Discussion

New emergent concepts

- Depression: difficulty to address the complexity of this multifactorial condition, which requires additional space and more specific questions to comprehensively capture its impact.
- Adaptation and use of strategies, personal fulfilment, acceptance of the reduced condition
→ patient empowerment

Robustness

The robust content validity demonstrated by the SarQoL questionnaire is further reinforced by the understanding that a deficiency in content validity can affect various measurement properties of the PROM.

Conclusion

In conclusion, the current form of the SarQoL provides robust evidence of content validity in patients and experts in evaluating the health-related quality of life in people with sarcopenia.

The use of additional scales to explore other concepts such as patient empowerment or depression can be used alongside the specific SarQoL questionnaire if deemed necessary and relevant for a particular situation.

Thanks for your attention !



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www.sarqol.org

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