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FURTER VALIDATION OF THE MCGILL QOL QUESTIONNAIRE: THE IMPORTANCE OF QUALITY OF LIFE IN PATIENT PERSPECTIVE

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P. Leombruni[1], G. Orofino[2], L. Lavagnino[1], M. Bolgiani[1], M. Guastavigna[1], A. Picardi[3], P. Caramello[2], S. Fassino[4]

[1] University of Turin, Department of Neurosciences, Turin, Italy, [2] Infectious Disease Hospital, Divisione A, Turin, Italy, [3] National Health Institute, Rome, Italy, [4] University of Turin, Neurosciences, Turin, Italy

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BACKGROUND: In the HAART era HIV has still a deep and broad impact on patients' daily life. The measure of Quality of Life (QOL) in HIV people is needed to monitor the impact of disease and treatment, but current literature emphasizes the need to implement QOL measures that go beyond the boundaries of symptoms and functional assessment and take into account patients' perspectives . The McGill Quality Of Life questionnaire (MQOL), that includes an assessment of the existential domain, seems suitable for this aim.

METHODS: The purpose of this study was to further test validity of the MQOL, and to assess its reliability and sensitivity to clinical change in HIV-infected outpatients. We studied a 216 sample of adult HIV out patients on HAART, attending the Infectious Disease Hospital- DivA, in Turin, Italy, of whom 84 (39%) were followed up after three months. 74% of patients were male, with a mean age of y44.2±9.5. 46% had an HIV-RNA level < 400 copies/mL, while 79% had a CD4+ cell count > 200/ µ L. The risk factor for HIV infection was homosexual relationship (35%), heterosexual relationship (37%), injective drug use (26%), blood transfusion (1%). Mean time from diagnosis of HIV infection was y6.3 ±5.8. Patients were assessed at baseline and after about three months with the MQOL and BDI, a questionnaire for depression, and HIV-RNA level and CD4+ cell counts were collected.

RESULTS: A fairly simple factor structure emerged, with a striking resemblance between the factors and the MQOL subscales. The test-retest reliability in clinically unchanged patients was satisfactory. Sensitivity to change was also satisfactory.

CONCLUSIONS: Our study contributed to building evidence of reliability and validity for the MQOL questionnaire, which may be particularly useful to assess the existential aspects of QOL that are particularly relevant to understand the HIV patients perspective on his disease and care.

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