Denver, Colorado USA

Category No.

Ref. No.

Abstract Reproduction Form B-1

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Title (type in DEVELOPMENT AND PSYCHOMETRIC VALIDATION OF A NEW SPECIFIC QUESTIONNAIRE TO ASSESS WOMEN QUALITY OF

LIFE (QoL) IN URINARY INCONTINENCE. LETTERS)

AIMS OF STUDY: The objectives were to construct and validate a new diseasespecific Questionnaire enable to measure Quality of Life (Q.o.L.) in Urinary Incontinence (UI) patients whatever the underlying mechanism (urge, stress,

METHODS: The project was conducted in 4 steps: a) interviews of 12 women suffering from stress incontinence (SI) who completed the urinary urge incontinence (UUI) specific 24-item original questionnaire and identification of additionnal concepts relevant to SI. b) Item generation. A group of experts analysed the resulting questionnaire and content validity was tested in a focus group of 6 women suffering from both UUI and SI. c) Psychometric validation. Verification of internal consistency reliability and clinical validity. d) Test-retest reliability.

RESULTS: The questionnaire (55 items) was self administered to 104 women with UI (mean age: 50 years). The item reduction based on homogeneity of the domains, item rank and fit in the Rasch modelling and the construct validity analysis (multitrait analysis) resulted in a new 28 item questionnaire measuring QoL in 6 domains:daily activities (7 items), efforts (4), self-image (7), emotional impact (6), sexuality (3), and global Q.o.L (1). The observed total score ranged 7-90 (mean 45) on the 0 to 100 scale. For each dimension and for the total score, Cronbach's α exceeded 0.70. The clinical validity was demonstrated by the significant impairment of QoL in patients reporting urinary leaks, greater urgerelated and stress-related urinary handicap (p<0.0005). 58 stable women filled in the questionnaire twice. Intraclass correlation coefficients ranged from 0,87 to 0.93 showing good test-retest reproducibility.

CONCLUSIONS: This new questionnaire which has been translated in different languages (English, Danish, Dutch, Flemish, Swedish, German), shows encouraging psychometric properties and should provide interesting Q.o.L.data to physician in addition to classical clinical evaluation of patients with UI.

This work was supported by an educational grant from Synthelabo.