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SHORT FORMS OF TWO CONDITION-SPECIFIC QUALITY OF LIFE QUESTIONNAIRES FOR WOMEN WITH PELVIC FLOOR DISORDERS (PFDI-20 & PFIQ -7)

Aims of Study

To develop valid and reliable short forms of two validated condition-specific quality of life (QOL) questionnaires for women with disorders of the pelvic floor (Pelvic Floor Distress Inventory (PFDI) and Pelvic Floor Impact Questionnaire (PFIQ).[1]

Methods

The PFDI and PFIQ long forms are based on the structure of and contain within them two validated questionnaires for urinary incontinence, the Urogenitial Distress Inventory (UDI) and the Incontinence Impact Questionnaire(IIQ)[2], as well as scales for bowel dysfunction, the Colo-rectal-anal Distress Inventory (CRADI) and Impact Questionnnaire (CRAIQ) and scales for pelvic organ prolapse, Pelvic Organ Prolapse Distress Inventory (POPDI) and Impact Questionnaire (POPIQ). The PFDI was designed to assess symptom distress in women with pelvic floor dysfunction and includes all of the items in the original UDI instrument plus items relating to pelvic organ prolapse and lower gastrointestinal dysfunction. The PFIQ was designed to assess life impact in women with pelvic floor disorders and like the PFDI contains all of the items included in the original IIQ as well as items related to other pelvic floor disorders. Data from the 100 women who contributed to the development and validation of the PFDI and PFIQ long forms were used to develop the short form questionnaires.[1] All subsets regression analysis (ASR) was used to find the items in each scale that best predicted the scale score on the respective long form. When different items appeared equivalent, a choice was made on item content. After development, the short forms and the PFDI and PFIQ long forms were administered to 35 women with pelvic floor disorders to evaluate the correlation between short and long forms in a second independent population.

Results

The short form version of the PFDI has a total of 20 questions and 3 scales (UDI - 6, POPDI - 6 & CRADI - 8). The POPDI-6 and the CRADI-8 demonstrate significant correlation with their long form scales(r = .92 & r = .93 respectively, p< .0001). In the case of the UDI, a short form already exists in the literature, the UDI - 6. Regression analysis did not identify a group or combination of questions substantially better than the UDI - 6. (r = .86, p < .0001) Given this, and the widespread use and familiarity of the UDI - 6, a decision was made to incorporate the existing UDI - 6 into the PFDI short form. For the PFIQ short form, the previously developed short form for the IIQ was used as a template (IIQ-7) The 7 items identified in the previously developed IIQ – 7 short form correlate highly with the IIQ long form (r = .96, p < .0001) as well as the long forms of the CRAIQ scale (r = .96, p < .0001) and the POPIQ (r = .94, p<.0001). ASR analysis did not identify any items or combination of items that correlated substantially better for any of the 3 scales. Again, given the familiarity and widespread use of the IIQ - 7, a decision was made to use the appropriately adapted items from this scale and apply them to all three scales of the PFIQ short form. The scales of the PFDI-20 and PFIQ-7 maintained their excellent correlation to the PFDI and PFIQ long forms in the 2nd independent sample (r=.88-.94 for scales of PFDI-20; r=.95-96 for scales of PFIQ-7, p<.0001 for all).

Conclusions

The PFDI-20 and PFIQ-7 are validated short forms of 2 condition-specific QOL questionnaires for women with pelvic floor disorders.

References

1. Psychometric Evaluation of two Comprehensive Condition-Specific Quality of Life Instruments for Women with Pelvic Floor Disorders. Am J Obstet Gynecol 2001; 185(6):1388-95.

2. Shumaker SA, Wyman JF, Uebersax JS, McClish D, Fantl JA. Health-related quality of life measures for women with urinary incontinence: the Incontinence Impact Questionnaire and the Urogenital Distress Inventory. Continence Program in Women (CPW) Research Group. Qual Life Res 1994;3:291-306.