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A NEW QUESTIONNAIRE FOR SATISFACTION WITH OAB TREATMENT: DEVELOPMENT AND CONTENT VALIDITY OF THE OAB SATISFACTION WITH TREATMENT QUESTIONNAIRE (OAB-SAT-Q)

Hypothesis / aims of study

Novel treatments for overactive bladder (OAB) are becoming increasingly available to relieve symptoms and allow patients to resume everyday activities and lead less restricted lives. Patient satisfaction with therapy can impact medication adherence, as well as treatment effectiveness. The study objective was to develop and assess the content validity of a new self-administered questionnaire on satisfaction with treatment for OAB, the Overactive Bladder Satisfaction with Treatment Questionnaire (OAB-SAT-q). The OAB-SAT-q is aligned with the International Consultation on Incontinence Questionnaire (ICIQ) and will be considered for inclusion as the OAB patient satisfaction module.

Study design, materials and methods

The content of 13 original questions were developed based on an extensive literature review, comprehensive assessment of existing treatment satisfaction instruments and clinical input from physicians experienced in treating OAB. The questionnaire was developed to assess satisfaction with treatment based on treatment effectiveness, side effects, convenience, preference, willingness to continue to use, recommendation to others with OAB and global satisfaction.

The content validity of the OAB-SAT-q was examined in two patient groups: 1) 28 patients with OAB in the care of a Urologist and 2) 13 patients recruited through newspaper advertisements for in-depth interviewing. The first group of patients completed an early version of the OAB-SAT-q and one of two generic treatment satisfaction instruments: Treatment Satisfaction Questionnaire for Medication (TSQM) or Functional Assessment of Chronic Illness Therapy-Treatment Satisfaction-General (FACIT-TS-G). Comprehension, ease of use, and completeness of factors relevant to satisfaction with OAB treatment and response scales were assessed. The questionnaire was revised prior to the recruitment of the second group of patients. These patients had OAB based upon self-reported symptoms of urinary urgency, frequency of 10 or more times in 24 hours, nocturia and incontinence. The second group of patients completed the revised OAB-SAT-q and was debriefed through personal interviews in an item-by-item approach to ascertain impressions and interpretations of the questions and response options.

Results

The questionnaire addresses the following domains: 1) satisfaction with treatment effectiveness, 2) impact of side effects, 3) treatment convenience, 4) preference for current versus past treatment, 5) willingness to continue treatment, 6) willingness to recommend treatment to others and 7) global satisfaction. Fourteen patients from the urology practice completing the OAB-SAT-q and TSQM (mean age = 55 years; 92% female) took 4 minutes to complete the OAB-SAT-q. These patients rated the OAB-SAT-q higher than the TSQM in terms of comprehensiveness of capturing satisfaction with treatment for OAB. An additional 14 patients from the urology practice completing the OAB-SAT-q and FACIT-TS-G (mean age= 62 years; 100% female) took approximately 4.8 minutes to complete the OAB-SAT-q. These patients rated both questionnaires equally high in terms of ease of completion and comprehensiveness. The OAB-SAT-q was modified after this testing session to reduce the number of questions on side effects (from five to three questions), reduce the 7-point Likert scale to a 6-point scale and equalize the positive and negative response options (deleted 'somewhat' and 'not sure' options). A final 12-item questionnaire with a 4-6 point Likert scale and 4-week recall period was developed.

Thirteen patients participating in the in-depth interviews (mean age = 58 years; 54% female; 54% were currently taking or had previously taken OAB medication, mean duration of bladder symptoms= 4.5 years) described the questionnaire as clear and easy to understand. The majority of these patients felt that 4 weeks was an adequate amount of time to recall their level of satisfaction with treatment. Patients, both currently on OAB treatment and those never having received treatment, declared that the questionnaire was easy to understand and answer and was comprehensive in addressing the scope of treatment, as it includes physical, social and psychological aspects. The debriefing interviews identified alternative wording for clarity and consistency in patient interpretation. Based on patient feedback, the instructions were modified to simplify the directions for completion and the wording for question on continued use of the treatment was simplified. Otherwise, the questionnaire remained unchanged after this extensive testing.

Interpretation of results

The questionnaire underwent rigorous development, is brief and has good content validity for clinical research. The questionnaire comprises the key factors influencing patient satisfaction, including treatment effectiveness, side effects, and convenience. The OAB-SAT-q is applicable to patients of both genders and ages 36 to 85 years.

Concluding message

The OAB-SAT-q represents an advance in the understanding and measurement of satisfaction with OAB treatment, which often impacts patients' adherence to therapy. This is the first OAB-specific questionnaire assessing satisfaction with treatment, and is suitable for inclusion in the ICIQ as the OAB patient satisfaction module.

FUNDING: Novartis Pharma AG