Translation And Validation Of A Quality Of Life And Needs Assessment Tool: The Cancer Rehabilitation Evaluation System And Its' Short Form



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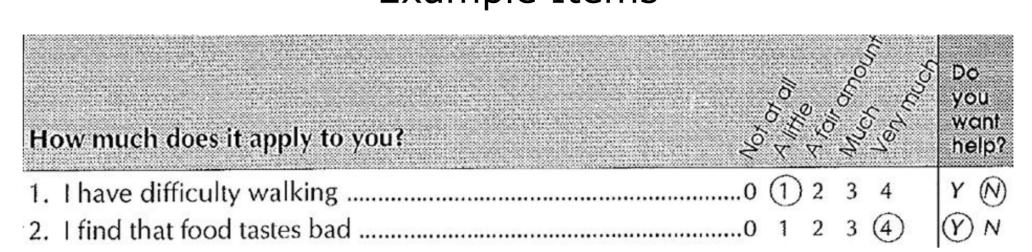
BACKGROUND

Patient-centeredness is an important aspect of quality care. The use of patient reported outcome tools (PRO) to stimulate communication and patient involvement is encouraged. The Cancer Rehabilitation Evaluation System (CARES), a quality of life (QOL) and needs assessment tool, was translated and validated for use in the Dutch speaking part of Belgium. Psychometric properties of the fulland short version were examined.

CARES

+/- 20min 139 items (min. 93- max.132) 31 subscale, 5 summary scale and a total score Domains of life: physical, medical interaction, psychosocial, marital, sexual, miscellaneous

CANCER REHABILITATION EVALUATION SYSTEM Example Items



CARES-ShortForm

+/- 10 min. 59 items (min. 32 - max. 57) 5 summary scale and a total score Domains of life: physical, medical interaction, psychosocial, marital, sexual, miscellaneous

METHODS

Data collection:

176 cancer patient



- CARES
- Karnofsky Performance Status scale (KPS)
- Hospital Anxiety and Depression Scale (HADS)
- Social Support List (SSL)
- Maudsley Marital Questionnaire (MMQ)
- European Organisation for Research and Treatment of Cancer-Quality Of Life-Core 30 (EORTC-QOL-C30)
- Distress Thermometer (DT)

T_1 (after +/- 12days)

- CARES
- supplementary questions on content of the CARES

RESULTS

Reliability

TABLE 1. Reliability Ratings CARES and CARES-SF

		ternal sistency	Test-Retest Correlation		
	a r*				
Global CARES	CARESa	CARES-SF ^a	CARES ^b	CARES-SFb	
and Scales					
PHYSICAL	.93	.83	.90	.89	
MEDICAL	.87	.72	.70	.70	
INTERACTION					
MARITAL	.90	.74	.84	.80	
PSYCHOSOCIAL	.96	.92	.91	.90	
SEXUAL	.92	.85	.89	.85	

* all r significant at 0.01 level (2-tailed), a research sample N=176,b test-retest sample n=158

Principal component analysis: the original factor solution of the CARES was approximately replicated, with factor loadings of .325-.851.

Construct validity

* all r significant at 0.01 level (2-tailed)

	CARES				
	Total	Physical	Medical	Marital	Psychosocial
Physical	.80*				
Medical	.49*	.32*			
Marital	.71*	.42*	.42*		
Psychosocial	.88*	.56*	.49*	.60*	
Sexual	.71*	.48*	.29*	.51*	.58*

TABLE 4. Intercorrelations of CARE-SF Total and Summary Scales

TABLE 5. Intercorrelations of CARES Total and Summary Scales

	CARES-SI				
	Total	Physical	Medical	Marital	Psychosocial
Physical	.78*				
Medical	.47*	.32*			
Marital	.60*	.33*	.35*		
Psychosocial	.67*	.55*	.46*	.51*	
Sexual	.74*	.49*	.28*	.51*	.63*

^{*} all r significant at 0.01 level (2-tailed)

Concurrent validity

TABLE 2. Correlations of CARES Total and Summary scores with Concurrent Validity Instruments

	CARES				
Concurrent Validity Instruments	Total	Physical	Psychosocial	Marital	Sexual
KPS	50*	67*			
HADS-A	.68*		.75*		
HADS-D	.67*		.64*		
SSL-I	.09		.07		
SSL-D	.38*		.43*		
MMQ-M	.25*			.48*	
MMQ-S	.54*				.55*
EORTC-QOL-C30 General Health	56*				
EORTC-QPM-C30 Quality of Life	53*				
DT	.63*				

TABLE 3. Correlations of CARES-SE Total and Summary scores with Concurrent Validity Instruments

CARES-SF							
Convergent Validity Instruments	Total	Physical	Psychosocial	Marital	Sexual		
KPS	54*	69*					
HADS-A	.66*		.73*				
HADS-D	.67*		.63*				
SSL-I	.09		.06				
SSL-D	.36*		.42*				
MMQ-M	.24*			.54*			
MMQ-S	.53*				.61*		
EORTC-QOL-C30 General Health	58*						
EORTC-QPM-C30 Quality of Life	54*						
DT	.63						

CONCLUSION

The Flemish translations of the CARES and the CARES-SF have excellent psychometric properties. Reliability and validity ratings are in the same range as in the original American instrument.

RESEARCH AND PRACTICE IMPLICATIONS

The CARES is a valuable PRO-tool for research, since it is comprehensive in its' content and proves to have good reliability and validity. If for implementation in clinical practice a shorter instrument is needed, the CARES-SF is a good alternative.

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