

Assessment of Health Related Quality of Life through modified questionnaire

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Abstract-Hypertension is a traditional risk factor for cardiovascular disease. Cardiovascular diseases caused 2.3 million deaths in India in the year 1990; this is expected to double by the year 2020. Hypertension is directly responsible for 57% of stroke deaths and 24% of coronary heart disease deaths in India². HRQOL is an important emergent outcome in Hypertensive studies. HRQOL of people with hypertension can be adversely affected by hypertension itself and side-effect of treatments[1]. Objective of the study is to identify the Health Related Quality of Life in Hypertensive patients with/without co-morbidities. A prospective study was carried out at super specialty hospital for a period of 6 months with in-patients and out-patients. HRQOL was identified using modified questionnaire which includes different domains. The study results showed that domains representing HRQOL of the hypertensive patients were found to be significantly affected majorly body pains (87%) and general well being (83.15%) .Hypertension reduced HRQOL may further progress to complication. Hence further research on effective interventions which should ensure maintenance of desirable HRQOL and reduce fatal complications of hypertension-combines the sentences and make into a single sentence.

INTRODUCTION

Hypertension is a traditional risk factor for cardiovascular disease and during the last decades it has become one of the main contributors to the global burden of disease. W.H.O reported that the worldwide prevalence of hypertension is more than 1 billion, whereas more than 7.1 million deaths may be attributed to hypertension annually[1] .Cardiovascular diseases Caused 2.3 million deaths in India in the year 1990;this is expected to double by the year 2020. Hypertension is directly responsible for 57% of all stroke deaths and 24% of all coronary heart disease deaths in India[2].The data from National Health and

Nutrition Examination Survey (NHANES) showed that 70% of hypertensive patients were aware of having the disease, 59% were under treatment, but only 34% had their hypertension under contro[3-6].

Health related Quality of Life (HRQOL) is “a multidimensional concept referring to a person’s total well-being, including his or her psychological, social, and physical health status”[7]. It is an important emergent outcome in Hypertensive studies. HRQOL of people with hypertension can be adversely affected by hypertension itself and side-effect of treatments. A hypertension diagnosis may increase an individual's awareness of bodily symptoms and make an otherwise "healthy" person ill. Physiologic changes due to illness or treatment, lead to symptoms, which in turn influences functional status or HRQOL. Thus, hypertension may have an impact on physical, psychological and social functioning of patients[9].

STUDY OBJECTIVE

Objective of this study is to find out the extent of Health Related Quality of Life affected through modified Questionnaire in hypertensive patients.

MATERIAL AND METHOD

A prospective study was carried out at super specialty hospital for a period of 6 months. The study enrolled 190 in-patients and out-patients who met inclusion criteria, after obtaining their informed consent

Participant selection:

Inclusion criteria

Adult hypertensive patients with or without co-morbid conditions Patients of either sex with a diagnosis of hypertension Inpatients and outpatients who visits medicine unit

Exclusion criteria

1. Patients <18years
2. Unconsciousness patients
3. Pregnancy induced hypertension
4. Other disease condition excluding hypertension and patients with hepatic and renal disorders

Instruments:**Patient data collection form**

A suitably designed patient data collection form was prepared for in-patients and out-patients which includes demographic details of the patients such as age, gender, education, social habits, occupation, family history and medication history and quality of life questionnaires.

Quality of life questionnaires

A suitable modified eight quality of life questionnaires developed by referring standard questionnaires like SF-36 QOL questionnaire, Hamilton Depression rating scale, Nottingham Health Profile, General well-being questionnaire, EURO-QOL Scale, WHO Questionnaire.

The modified questionnaire was concerned with domains regarding physical functioning, bodily pain, general health, vitality, general well-being, social functioning, mental state which reflects the Health Related Quality of Life in Hypertensive patients.

Method

The study was initiated at department of medicine by selecting the patients based on inclusion and exclusion criteria of the study. The patients were briefed about the study and were enrolled into the study after obtaining informed consent. All the participants were interviewed personally using the modified questionnaire and find out the status of health related quality of life.

Results

Table 1 shows the characteristics of the correspondents. A total of 190 patients included in the study. Majority of respondents are within the age of 41-60yrs, 43.15% illiterates and employees. Table-1

Characteristics	Number	Percentage
Gender		
Male	103	54.21
Female	87	45.78
Age(in yrs)		
21 – 40	12	6.31
41 - 60	103	54.21
61 - 80	73	38.42
81 - 100	2	1.05
Educational status		
Illiterate	82	43.15
Primary	48	25.26
Secondary	33	17.36
Undergraduate	27	14.21
Occupational status		
Occupation	68	35.78
Employee	106	55.78
Retired	16	8.42
Complications		
With	113	59.47
Without	77	40.52

Characteristics of participants

Male respondents of 58 and 78 were smokers and alcoholic, contributing risk factor for hypertension.

Table-2 Social habits of the participants and social habits of the respondents

Type	No. of males(n)	No of Female(n)
Smokers	58	5
Non smokers	45	82
Alcoholic	78	8
Non alcoholic	25	79

Fig 1 represents the percentage affected on various domains which represents the HRQOL in participated hypertension patients. HRQOL of the hypertensive patients was found to be affected as follows.

Domain	Type of illness	Percentage
Physical functioning	perform only mild	53.68
	Not able to perform	2.10
Body pains	Headache	4
	Dizziness	23
	lightheadedness	17
General health	Fall sick easily	61.05
	Cannot describe	1.56
General well being	difficult to sleep,	34.73
	occasionally difficult to sleep	48.42
Decreased vitality	most of the times,	33.15
	all the time	7.89
Reduced social functioning	most of the times,	18.42
	all the time	12.10
mental health	anxiety	48.95
	depressed	25.26

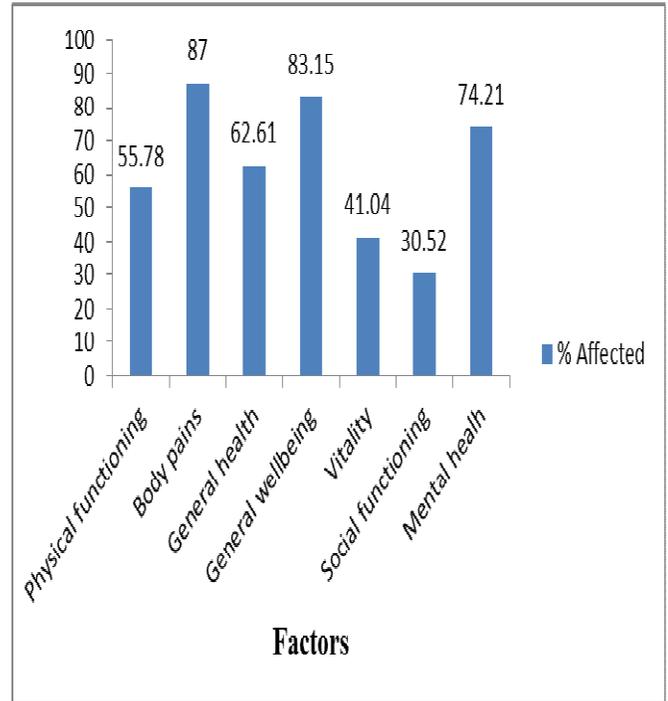


Figure 1:percentage affected of domains representing HRQOL

It is found that body pains is the most affected factor, Secondly general wellbeing and Social functioning is least affected factor representing HRQOL in hypertensive patients .

CONCLUSION

The study results showed that all the domains included in the study affected in Hypertensive patients has significant negative impact on HRQOL. This study provides an insight on HRQOL in hypertensive patients. The necessity of patient counseling by a clinical pharmacist plays a major role and educational interventions on healthy life styles which ensure maintenance of desirable HRQOL as well as in the prevention of high blood pressure or reduce fatal complications of hypertension.

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