NEW SCORE MEASURES HEALTH-RELATED QUALITY OF LIFE IN PATIENTS WITH KIDNEY FAILURE

Highlights
- The results of a new study support the validity of a score that considers various patient-reported outcome measures and preferences for assessing health-related quality of life in individuals with kidney failure.
- The score is calculated from assessments of cognitive function, depression, fatigue, pain interference, physical functioning, sleep disturbance, and ability to participate in social roles.

Washington, DC (July 16, 2021) — Results from a new study support the validity of a score that considers various patient-reported measures and preferences for assessing health-related quality of life and promoting patient-centered care in individuals with kidney failure. The study appears in an upcoming issue of CJASN.

The score, called the Patient Reported Outcomes Measurement Information System (PROMIS®)-Preference (PROPr) Summary Score, is determined from 7 domains: cognitive function, depression, fatigue, pain interference, physical functioning, sleep disturbance, and ability to participate in social roles.

When investigators led by Istvan Mucsi, MD, PhD and Jing Zhang BSc, MPH (University Health Network and University of Toronto) correlated PROPr with other health-related measures, their findings supported the validity of PROPr among 524 patients who were undergoing hemodialysis or who had recently received kidney transplants.

“Up to 70% of patients with kidney failure experience persistent physical symptoms and emotional distress that substantially impair health-related quality of life. These concerns are under-reported, under-recognized and under-managed,” said Dr. Mucsi. “Our results open the doors for the use of PROPr and PROMIS® tools in nephrology research and in the care of patients with kidney failure.”
Study co-authors include Ron D. Hays, PhD, Janel Hanmer, MD, PhD, Barry Dewit, PhD, John Devin Peipert, PhD, Evan Tang, BSc, Daniel Breitner, BSc, Mohammed Saqib, BSc, Dan Li, BSc, Rabail Siddiqui, BSc, Nathaniel Edwards, MS.

Disclosures: The authors reported no relevant financial disclosures.


The content of this article does not reflect the views or opinions of The American Society of Nephrology (ASN). Responsibility for the information and views expressed therein lies entirely with the author(s). ASN does not offer medical advice. All content in ASN publications is for informational purposes only, and is not intended to cover all possible uses, directions, precautions, drug interactions, or adverse effects. This content should not be used during a medical emergency or for the diagnosis or treatment of any medical condition. Please consult your doctor or other qualified health care provider if you have any questions about a medical condition, or before taking any drug, changing your diet or commencing or discontinuing any course of treatment. Do not ignore or delay obtaining professional medical advice because of information accessed through ASN. Call 911 or your doctor for all medical emergencies.

Since 1966, ASN has been leading the fight to prevent, treat, and cure kidney diseases throughout the world by educating health professionals and scientists, advancing research and innovation, communicating new knowledge, and advocating for the highest quality care for patients. ASN has more than 21,000 members representing 131 countries. For more information, visit www.asn-online.org.