



ORIGINAL ARTICLE

Psychometric validation of the Spanish version of the USS-PROM questionnaire for patients who undergo anterior urethral surgery[☆]



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KEYWORDS

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Outcome assessment;
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Abstract

Objective: To translate into Spanish and validate the Urethral Stricture Surgery Patient-Reported Outcome Measure (USS-PROM) questionnaire, assessing its psychometric properties and determining its suitability for clinical use in our community. We also assessed the potential changes in ejaculatory function using the Male Sexual Health Questionnaire-Ejaculatory Dysfunction (MSHQ-EjD).

Materials and methods: A systematic translation of the British version was performed. Patients scheduled for anterior urethral stricture surgery between September 2014 and September 2015 were prospectively included in the study. All patients completed the questionnaire before and after the surgery. We conducted an in-depth psychometric study of the questionnaire.

Results: We assessed the responses of a total of 40 patients. The questionnaire showed its validity, presenting an excellent negative correlation between the voiding symptom scores and the maximum flow ($r = -0.6$, $P < .001$), and also showed significant improvement in the EQ5D-VAS (visual analogue scale) and the time trade-off. For internal consistency, the Cronbach's alpha was 0.701. For the test-retest reliability, the overall intraclass correlation coefficient (ICC) was 0.974, and the ICC for each item separately ranged from 0.799 to 0.980. We observed significant improvement in all items regarding urinary symptoms and health-related quality of life ($P < .001$), thereby demonstrating the response capacity to changing the questionnaire. There were no significant changes in the MSHQ-EjD.

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PALABRAS CLAVE

Estenosis de uretra;
Cirugía uretral;
Uretroplastia;
Valoración de
resultados;
Calidad de vida;
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paciente

Conclusions: The Spanish version of the USS-PROM questionnaire is a valid instrument for quantifying changes in voiding symptoms and the health-related quality of life of patients undergoing anterior urethral surgery.

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Validación psicométrica de la versión en castellano del cuestionario USS-PROM para pacientes sometidos a cirugía de uretra anterior

Resumen

Objetivo: Traducir y validar en lengua castellana el cuestionario *Urethral Stricture Surgery Patient-Reported Outcome Measure* (USS-PROM), evaluar sus propiedades psicométricas y determinar su idoneidad para su uso clínico en nuestro medio. Adicionalmente, se valoraron los posibles cambios en la función eyaculatoria mediante el *Male Sexual Health Questionnaire-Ejaculatory Dysfunction* (MSHQ-EJD).

Material y métodos: Se realizó una traducción sistemática de la versión británica. De forma prospectiva, entre septiembre 2014 y septiembre 2015 se incluyeron pacientes programados para cirugía de estenosis de uretra anterior. Todos los pacientes completaron el cuestionario antes y después de la cirugía. Se realizó un estudio psicométrico en profundidad del cuestionario.

Resultados: Se evaluaron las respuestas de un total de 40 pacientes. El cuestionario demostró su validez presentando excelente correlación negativa entre las puntuaciones de los síntomas de vaciado y el flujo máximo ($r = -0.6$, $p < 0,001$), y mostrando también mejoría significativa en el EQ5D-visual analogue scale (VAS) y el *time trade-off* (TTO). Para la consistencia interna, el alfa de Cronbach fue de 0,701. Para la fiabilidad test-retest el coeficiente de correlación intraclase (CCI) global fue de 0,974 y los CCI de cada ítem por separado oscilaron entre 0,799 y 0,980. Se observaron mejoras significativas en todos los ítems de síntomas miccionales y calidad de vida relacionada con la salud (CVRS) ($p < 0,001$), quedando demostrada la capacidad de respuesta al cambio del cuestionario. No observamos cambios significativos en el MSHQ-EJD.

Conclusiones: La versión en castellano del cuestionario USS-PROM es un instrumento válido para cuantificar los cambios en los síntomas de vaciado y la CVRS de los pacientes sometidos a cirugía de uretra anterior.

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Introduction

Traditional success criteria of urethral surgery are heterogeneous and are based solely on objective measures or perceptions, such as flowmetry parameters, voiding cystourethrography, urethroscopy, post-void residue, or absence of operations after surgery. In addition, several authors have shown that these objective measurements do not coincide in many cases with the subjective success perceived by the patient.^{1,2} Therefore, recent studies have emphasized the need to start using questionnaires that measure the results of surgery according to the subjective perspective of the patient (IPSS, IIEF, MSHQ, AUA Symptoms Score or quality of life questionnaires), although there is not yet consensus about which one to use.³ Meanwhile, both the Food and Drug Administration (FDA) and the European Medicines Agency (EMA) have recently pointed out the importance of measuring the patient's subjective perception, regarding the outcome of a medical act, for the correct assessment of the quality of a treatment.^{4,5}

These data, coupled with the eminently functional character of reconstructive surgery of the urethra, allow us to understand the current need for a consensus tool to measure surgical outcomes in terms of subjective benefit for the patient undergoing an urethral surgery.

In this context, the British Jackson et al.⁶ developed and validated for the first time, in 2011, a questionnaire based on the measurement of subjective patient outcomes for patients undergoing urethral surgery (Urethral Stricture Surgery Patient Report Outcome Measure [USS-PROM]). Subsequently, other groups have adapted this questionnaire to other languages, such as Italian or German.^{7,8}

Objective

The objective of our study was to translate and validate the Spanish language version of the USS-PROM British questionnaire, evaluate its psychometric properties and determine their suitability for routine clinical use in our environment.

Materials and methods

USS-PROM questionnaire (Appendix A)

First, the British version of the questionnaire⁶ was translated, independently, by two urologists (Puche-Sanz and Martín-Way) and a Native American professional translator specialized in medical scientific translation, there not being substantial differences between the texts. After pooling, the

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