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ORIGINAL ARTICLE

Reference values for the CAVIPRES-30 questionnaire, a global questionnaire on the health-related quality of life of patients with prostate cancer☆

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Abstract
Objective: Define and establish the reference values of the CAVIPRES-30 questionnaire, a health related quality of life questionnaire specific for prostate cancer patients.
Materials and methods: The CAVIPRES-30 was administered to 2630 males with prostate cancer included by 238 Urologist belonging to the Spanish National Healthcare System. Descriptive analysis on socio-demographic and clinical data was performed, and multivariate analyses were used to corroborate that stratification variables were statistically significantly and independently associated to the overall score of the questionnaire.
Results: The variables, time since diagnosis of the illness, whether the patient had a stable partner or not, and whether he was undergoing symptomatic treatment or not were statistically, significantly, and independently associated ($p < .001$) to the overall score of the questionnaire. The reference values table of the CAVIPRES-30 questionnaire is made up of different kinds of information of each patient profile: sample size, descriptive statistics with regard to the overall score, Cronbach's alpha value (between .791 and .875) and the questionnaire's values are reported by deciles.
Conclusions: The results of this study provide new proof as to the suitability and usefulness of the CAVIPRES-30 questionnaire as an instrument for assessing individually the quality of life of prostate cancer patients.

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PALABRAS CLAVE
Cáncer de próstata;
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Cuestionario;
Calidad de vida relacionada con la salud específica;
Valores de referencia

Valores de referencia para el cuestionario CAVIPRES-30, un cuestionario global sobre la calidad de vida relacionada con la salud de pacientes con cáncer de próstata

Resumen

Objetivo: Definir y establecer los valores de referencia del cuestionario CAVIPRES-30, un cuestionario de la calidad de vida relacionada con la salud específica para pacientes con cáncer de próstata.

Material y métodos: El cuestionario CAVIPRES-30 fue administrado a 2.630 hombres con cáncer de próstata incluidos por 238 urólogos del sistema de sanidad español. Se llevaron a cabo análisis descriptivos de los datos sociodemográficos y clínicos, y análisis multivariados para corroborar que las variables estratificadas se asociaban de forma independiente y estadísticamente significativa a la puntuación global del cuestionario.

Resultados: Las variables de tiempo desde el diagnóstico de la enfermedad, tanto si el paciente tenía pareja estable como si no, y si estaba o no recibiendo tratamiento sintomático, se asociaron de forma independiente y estadísticamente significativa ($p < 0{,}001$) a la puntuación global del cuestionario. La tabla de valores de referencia del cuestionario CAVIPRES-30 contiene diferentes tipos de información sobre el perfil de cada paciente: tamaño muestral, estadísticas descriptivas con respecto a la puntuación global y el valor de alfa de Cronbach (entre 0,791 y 0,875); los valores del cuestionario están reportados en deciles.

Conclusiones: Los resultados de este estudio aportan nuevas evidencias con respecto a la idoneidad y utilidad del cuestionario CAVIPRES-30 como instrumento para evaluar individualmente la calidad de vida del cáncer de próstata.

Introduction

Prostate cancer (PCa) was the cancer with the highest incidence and the second leading cause of death among men in the western world in 2010.[1] It is estimated that one in 6 men will develop this tumor in their lifetime.[2] In Spain, with an estimated standardized incidence rate for the Spanish population of 82.27 per 100,000 men, PCa is, like in the rest of western countries, an important health problem.[3]

The different effects of the treatments, the functional alterations and the emotional burden experienced by patients with PCa affect their health-related quality of life (HRQOL).[4–6] For this reason, it is important to have standardized HRQOL assessment tools, properly developed and validated, and specific for these patients. Thus, the results of clinical research and those of the research on health results can be integrated for its use in everyday clinical practice, particularly for those patients who survive for years.

According to most of the reviews published regarding specific HRQOL tools for oncology patients and/or for patients with PCa,[7–10] many of these tools have relevant methodological limitations since no formal validation studies or studies on testing of the main psychometric properties internationally recommended[11] are available, or since subgroups of relevant patients have been omitted.[7,10]

One of the few exceptions to this situation is the CAVIPRES-30 questionnaire,[12,13] an HRQOL questionnaire specific for patients with PCa incorporating the patient's perspective from its initial stages and which is in line with the main international recommendations.[11] There are different approaches oriented to generating this kind of information,[11] including the so-called reference population values or groups or the target population under study, one of the most commonly used ones.[14]

Thus, the reference values from a questionnaire enable us to locate the score achieved by a particular patient into their corresponding reference group, which makes it possible to know the distance between the individual value and the expected value.[11]

The aim of the current study was to define and establish the reference values for the CAVIPRES-30 questionnaire, developed from and incorporating the patient's perspective, in order to provide an information tool, which will favor and facilitate its interpretation in routine clinical practice with these patients.

Materials and methods

Design

A cross-sectional, multicenter, descriptive epidemiological study was conducted using quotas for inclusion. Data collection was carried out between June and November 2009 with the collaboration of 238 urology specialists from the Spanish public healthcare system. The main sources of information were the patients themselves and their respective medical records. This study was approved by the clinical research ethics committee at the Hospital Clínico San Carlos, Madrid.

Population

The patients included in the study had to meet the following characteristics: (a) having been diagnosed with PCa in any stage, progression time and under any treatment;