J COLOPROCTOL (RIO J). 2017;xxx(xx):xxx–xxx

Journal of Coloproctology

www.jcol.org.br

Original Article

Quality of life of patients with inflammatory bowel disease

Thais Karla Vivan[a,*], *Bianca Mariz Santos*[a], *Carlos Henrique Marques dos Santos*[b]

[a] *Hospital Regional do Mato Grosso do Sul, Campo Grande, MS, Brazil*
[b] *Colégio Brasileiro de Coloproctologia, Campo Grande, MS, Brazil*

ARTICLE INFO

Article history:
Received 13 February 2017
Accepted 19 June 2017
Available online xxx

Keywords:
Inflammatory bowel diseases
Crohn's disease
Ulcerative colitis
Colitis
Quality of life

ABSTRACT

Rationale: Crohn's disease and non-specific ulcerative colitis are part of inflammatory bowel diseases. They have a chronic evolution, leading to important repercussions on patients' quality of life. Measuring this subjective parameter requires an evaluation tool in clinical trials and health programs. The "Inflammatory Bowel Disease Questionnaire" is an American instrument of McMaster University, which had its reproducibility and validity determined in studies in other countries as a measure of the quality of life in IBD.
Objective: To evaluate the quality of life of patients with inflammatory bowel disease through the Inflammatory Bowel Disease Questionnaire, and to correlate the results with sociodemographic data of the patients.
Methods: This is a prospective cross-sectional study carried out with 58 patients; the patients' follow-up was conducted at the outpatient clinic of Coloproctology.
Results: Among the 58 patients evaluated, 70.1% had DC, 62.1% were women, the mean age was 46.08 years, 96.6% were non-smokers, and 24.1% were submitted to surgery for the underlying disease. 43% were in a combination therapy scheme, 44% in monotherapy, and 12% were not using medication. Significant change in quality of life was observed in patients taking prednisone.
Conclusion: The patients with better quality of life are those who were taking prednisone. There was no other correlation with significance in the patients' quality of life.

© 2017 Published by Elsevier Editora Ltda. on behalf of Sociedade Brasileira de Coloproctologia. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Qualidade de vida dos pacientes com doença inflamatória intestinal

Palavras-chave:
Doença inflamatória intestinal
Doença de Crohn
Colite ulcerativa

RESUMO

Racional: Faz parte das doenças inflamatórias intestinais a doença de Crohn e a Retocolite Ulcerativa Inespecífica Possuem evolução crônica, gerando repercussões importantes na qualidade de vida dos doentes. Medir esse parâmetro subjetivo requer um instrumento de avaliação em ensaios clínicos e de programas de saúde. O "Inflammatory Bowel Disease

* *Corresponding author.*
E-mail: thais.vivan@hotmail.com (T.K. Vivan).
http://dx.doi.org/10.1016/j.jcol.2017.06.009
2237-9363/© 2017 Published by Elsevier Editora Ltda. on behalf of Sociedade Brasileira de Coloproctologia. This is an open access article under the CC BY-NC-ND license (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Please cite this article in press as: Vivan TK, et al. Quality of life of patients with inflammatory bowel disease. J Coloproctol (Rio J). 2017. http://dx.doi.org/10.1016/j.jcol.2017.06.009

Colite
Qualidade de vida

Questionnaire" é um instrumento norte-americano da McMaster University, que teve sua reprodutibilidade e validade determinada em estudos em outros países, como medida da qualidade de vida em doenças inflamatórias intestinais.

Objetivo: Avaliar a qualidade de vida dos pacientes com doença inflamatória intestinal através do questionário "Inflammatory Bowel Disease Questionnaire", e correlacionar os resultados com dados sociodemográficos dos pacientes.

Método: Estudo prospectivo transversal, realizado com 58 pacientes, acompanhamento no ambulatório de Coloproctologia.

Resultados: Dentre os 58 pacientes avaliados, 70,1% possuíam DC, 62,1% mulheres, idade média de 46,08 anos, 96,6% não tabagistas, 24,1% submetidos à cirurgia pela doença de base. Estavam em uso de terapia combinada 43%, monoterapia 44% e sem uso de medicamento 12%. Foi observada alteração significativa da qualidade de vida nos pacientes em uso de prednisona.

Conclusão: Os pacientes com melhor qualidade de vida são os que estavam em uso de prednisona. Não houve outra correlação com significância na qualidade de vida.

© 2017 Publicado por Elsevier Editora Ltda. em nome da Sociedade Brasileira de Coloproctologia. Este é um artigo Open Access sob a licença de CC BY-NC-ND (http://creativecommons.org/licenses/by-nc-nd/4.0/).

Introduction

Crohn's disease (CD) and idiopathic ulcerative rectocolitis (IUR) are the forms of inflammatory bowel diseases (IBD), being characterized by a chronic inflammation of the intestine. The cause of IBD is still unknown and there is some interaction between genetic, environmental and immune factors.[1,2] These diseases affect young and old people, with no predilection as for race and gender.[3,4]

According to Ordinance No. 483 of April 1, 2014m of the Brazilian Ministry of Health, chronic diseases are those disorders with a gradual onset, with a long or uncertain duration, and which, in general, present multiple causes and whose treatment involves changes of the patient style of life, in a process of continuous care that usually does not lead to one's healing.

The concept of quality of life (QoL) refers to how well people perform their functions in daily life and the personal assessment of their well-being, and the forms of inflammatory bowel disease, both IUR and CD, have important repercussions on the QoL of the carriers.[5]

The measurement of QoL is an important parameter when one assesses the impact of chronic diseases, since the physiological changes, despite providing important information for the clinician, can cause various effects both for patients and their families, as they influence functional capacity and well-being – critical aspects for the patient.[6,7]

In order to evaluate the QoL of patients with inflammatory bowel disease, the "Inflammatory Bowel Disease Questionnaire" questionnaire, already validated in Brazil, was applied and subsequently we correlated the IBDQ data with sociodemographic and morbidity data available.

Methods

This is a cross-sectional, prospective study, with no conflict of interest, and costs will be borne by the researchers. The study was conducted from August 2016 to January 2017, and involved patients with IBD registered in the exceptional medicine program of the Health Department of the State of Mato Grosso do Sul (MS), after their evaluation by an auditor physician and with the Ordinance criteria being fulfilled. Patients with an undetermined cause of colitis and patients undergoing diagnostic investigation were excluded.

To evaluate the QoL, the North American form of McMaster University, "Inflammatory Bowel Disease Questionnaire (IBDQ)", a questionnaire translated and validated in Portuguese, was the instrument applied, along with a small form on morbidity and sociodemographic characteristics. The IBDQ consists of 32 items covering four domains: intestinal symptoms, systemic symptoms, social aspects, and emotional aspects, and the response options are presented in the form of multiple choice, with seven alternatives. The scores 1 and 7 mean, respectively, the worse and the better state of QoL.[5,6]

The volunteer patients answered the questionnaires without any external help; once completed, the questionnaires were confidentially deposited in a box.

After the data collection, the IBDQ results were cross-checked with the questionnaire on socio-demographic characteristics, as follows: age, gender, disease, diagnosis time, surgery resulting from the disease, medication in use, smoking, and disease activity. The results of the IBDQ were submitted to statistical treatment with the use of SPSS (version 23) and GraphPad Prism (version 6.01) programs, cluster analysis, and the chi-squared test, with significance established as $p < 0.05$.

Results

Descriptive analysis

Age and gender

The mean age of all patients studied ($n = 58$) was 46.1 ± 15.1 years. The mean age of men ($n = 22$, 37.9% of the total) was

Please cite this article in press as: Vivan TK, et al. Quality of life of patients with inflammatory bowel disease. J Coloproctol (Rio J). 2017. http://dx.doi.org/10.1016/j.jcol.2017.06.009

Download English Version:

https://daneshyari.com/en/article/8834457

Download Persian Version:

https://daneshyari.com/article/8834457

Daneshyari.com