Rehabilitation and Disability
WIP-0480 RESPONSIVENESS AND INTERPRETABILITY: A HEAD-TO-HEAD COMPARISON OF THE QUEBEC BACK PAIN DISABILITY SCALE AND ROLAND MORRIS DISABILITY QUESTIONNAIRE
E. Cruz1, R. Fernandes1, F. Carnide2
1Instituto Politécnico de Setúbal, Escola Superior de Saúde, Setúbal, 2CIPER LBMF, Universidade de Lisboa Faculdade de Motricidade Humana, Lisboa, Portugal
Objectives: The aim of this study was to compare the responsiveness and interpretability of the Portuguese Versions of the Quebec Back Pain Disability Scale (QBPDS-PT) and Roland Morris Disability Questionnaire (RMDQ), in patients with CLBP undergoing physical therapy.
Methods: Both questionnaires were completed by 132 CLBP patients at the baseline and after 6 week of a multimodal physical therapy treatment. At the follow-up, the clinical change was estimated using a seven-point perception of change scale. Responsiveness was assessed through anchor-based methods (correlation coefficients and ROC Curves). The influence of individual factors at baseline in responsiveness and interpretability were examined.
Results: A slightly superior discriminative ability of the QBPDS-PT was founded but this difference was not statistically significant (p = 0.854). The MCID values founded were about 2.5 points for QBPDS-PT, and six points for RMDQ-PT (approximately 1.5 points in the original 0–24 scale). There is a trend for the RMDQ-PT to be more responsive than the QBPDS-PT for patients with low levels of disability and low severity at the baseline, whereas the QBPDS-PT seems to be more responsive for patients with high levels of disability and severity. However, these differences remained none statistically significant.
Conclusion: Both questionnaires perform similarly in their ability to detect change after a six-week multimodal physiotherapy treatment. The differences observed on the effects of baseline on questionnaires’ responsiveness should be explored in further research.