Quality of life in coeliac disease: the qualitative development of a new patient-reported outcome measure UNIVERSITY OF

Aims and Background

The purpose of this study was to develop a new disease-specific patient-reported outcome measure (PROM), based on qualitative interview data, investigating the health-related quality of life of people living with coeliac disease. There are two existing diseasespecific PROMs that assess quality of life in people with coeliac disease, the Celiac Disease Questionnaire (CDQ)¹ and the Coeliac Disease Quality of Life Survey (CD-QOL)². However, there are limitations in the development of both measures, including the derivation of items.

Coeliac Disease

- Coeliac disease is a chronic autoimmune disease in which an immune response is triggered by the consumption of gluten (wheat, barley, rye), resulting in intestinal damage.
- The estimated prevalence of coeliac disease is approximately 1%.
- Classic symptoms experienced prior to diagnosis include diarrhoea, abdominal discomfort, fatigue and weight loss.
- The condition is typically diagnosed by serological testing followed by duodenal biopsy.
- Treatment is a life-long gluten-free diet.

Methods

In-depth, semi-structured interviews were conducted with adults with coeliac disease between June and October 2012.

Recruitment

- Interview participants were recruited through Coeliac UK, a charity for people living with coeliac disease in the UK, and snowball sampling.
- Participants were recruited from three geographical areas within England. These areas were selected to ensure that members from both rural and urban areas, and more and less socially deprived areas were included in the study.
- Variation was sought across demographic and disease characteristics, particularly gender, age, and duration since diagnosis.

Data Collection and Analysis

- Interviews explored the impact of coeliac disease on the participant's quality of life. They were conducted at the participant's home, workplace, or at the University of Oxford and ranged between 50 minutes and two and a half hours in duration.
- Interview data was audio-recorded with the participant's consent, transcribed verbatim, and analysed thematically in NVivo 9.
- Candidate items were drafted for each theme identified.

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Results

Participants

Twenty-three adults with coeliac disease were interviewed. A

Table 1: Summary of Interview participants (total, n=23)				
Participant Characteristic	Summary			
Age Range (years):	29 – 90			

summary of participant characteristics can be found in Table 1.		Theme	Sub-themes	Number of Items	Selected Candidate ((During the <u>past 4 w</u>
Participant Characteristic Age Range (years): Gender (n): Marital Status (n):	29 – 90 Female (15), Male (8) Single (1), Married (17), Widowed (3), Divorced (2)	Gluten-free Diet	 Food shopping Food choice Acceptability of gluten- free food Cross-contamination Risk Eating outside of the home 	16	 were you annoyed food? were you disappoi alternatives? did you feel uncon for your diet? did you find it diffi
Ethnic Origin (n): Occupational Status (n):	 White British (19), White Irish (3), Asian/Asian British (1) Full-time work (4), Part-time work (6), Unemployed (1), Retired (12) 	Emotional Health	 Concerns and worries Feelings Isolation and exclusion Unwanted visibility 	15	were you feeling d did you feel isolate were you concerne related to your coe
Time since diagnosis (years):<1 - 40	Impact on Activities	 Work Holidays Other social activities Travelling Planning ahead Time Avoiding social activities 	12	 were your work ac were your holiday did you have diffic travelling? did you avoid social 	
were grouped into the following six themes: gluten-free diet, emotional health, impact on activities, symptoms, relationships, and financial issues. Sub-themes identified in relation to each theme are shown in Table 2. Of particular note, participants described various practical and social difficulties with following a		Symptoms	 Gastrointestinal Energy Pain Concentration Weight 	9	 were you affected movements? were you troubled were you affected was your concentred
 gluten-free diet, for example, negotiating situations which required obtaining suitable food while away from the home. A second notable area was the impact of the condition on the participants' emotional health. Participants had various concerns and worries, such as accidentally consuming gluten and becoming unwell, and developing associated conditions. Candidate items were drafted for each theme identified, resulting in a total of sixty-three candidate items for a new PROM exploring quality of life in coeliac disease. A selection of candidate items for each theme are presented in Table 2. 	Relationships	 Support Trust Lack of understanding 	7	 were you affected members? did you feel guilty friends or family members were you annoyed condition and/or of choice)? 	
	Financial Issues		4	were you annoyed food? did you feel guilty for you?	

Conclusions

This research has identified the wide variety of ways in which coeliac disease impacts on the quality of life of people living with the condition. Existing disease-specific PROMs omit or poorly cover several of the quality of life issues identified, for example, the CD-QOL has no symptom items, and the CDQ has few items about the difficulties faced following a gluten-free diet.

Table 2: Analytic themes, sub-themes and selected candidate items (total number of candidate items, n=63)

Consequently, the content validity of these measures is limited. Candidate items for a new diseasespecific PROM which proposes to address these limitations have been drafted. These items will undergo expert review, cognitive testing, and item reduction prior to an examination of the psychometric properties of this new measure.



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Items weeks, how often...)

ed or frustrated by trying to find suitable

ointed with the taste or texture of gluten-free

omfortable about other people having to cater

fficult to explain your dietary needs to others?

down and / or in low spirits? ated because of your coeliac disease? rned about developing a health condition coeliac disease?

activities affected? ay or leisure activities affected? ficulty finding something to eat whilst

cial activities?

ed by diarrhoea and/or loose bowel

ed by nausea and/or vomiting? ed by tiredness or lack of energy? ntration or ability to think clearly affected?

ed by the lack of support of friends or family

cy about the impact of your condition on members?

ed by others lack of understanding about your [•] dietary needs (e.g. dismissing it as a lifestyle

ed or frustrated about the cost of gluten-free

ty about other people buying gluten-free foods