ORIGINAL ARTICLE

Spanish Cultural Adaptation of the Questionnaire Early Arthritis for Psoriatic Patients

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Abstract

Introduction and objectives: The Early Arthritis for Psoriatic patients (EARP) questionnaire is a screening tool for psoriatic arthritis. The original Italian version has good measurement properties but the EARP requires translation and adaptation for use in Spain. This article describes the cultural adaptation process as a step prior to validation.

Material and methods: We used the principles of good practice for the cross-cultural adaptation of patient-reported outcomes measurement established by the International Society Pharmacoeconomics and Outcome Research. The steps in this process were preparation, forward translation, reconciliation, back-translation and review, harmonization, cognitive debriefing and review, and proofreading. During preparation the developers of the original questionnaire were asked for their permission to adapt the EARP for use in Spain and to act as consultants during the process.

Results: The original questionnaire was translated into Spanish by native Spanish translators, who made slight changes that were approved by the questionnaire’s developers. The Spanish version was then back-translated into Italian; that version was reviewed to confirm equivalence with the original Italian text. The reconciled Spanish EARP was then tested for comprehensibility and interpretation in a group of 35 patients. All the patients answered all items without making additional comments.

Conclusion: This cultural adaptation of the EARP questionnaire for Spanish populations is the first step towards its later use in routine clinical practice. The application of a cross-cultural adaptation method ensured equivalence between the original and Spanish versions of the EARP. The Spanish questionnaire will be validated in a second stage.

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KEYWORDS
Psoriatic arthritis; Psoriasis; Screening; EARP questionnaire; Cultural adaptation


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Adaptación cultural al español del cuestionario Early Arthritis for Psoriatic Patients

Resumen

Introducción y objetivos: El cuestionario Early Arthritis for Psoriatic patients (EARP) es una herramienta de screening para artritis psoriásica con buenas propiedades de medición en su versión original en italiano que no ha sido todavía adaptado culturalmente al español. Este artículo expone la adaptación para población española como paso previo a su validación.

Material y método: Aplicación de la metodología recomendada por la International Society for Pharmacoeconomics and Outcomes Research para adaptaciones culturales de medidas centradas en el paciente y que consta de las siguientes fases: preparación, traducción, reconciliación, retrotraducción y su revisión, armonización, test de comprensión y su revisión y corrección de pruebas. En la preparación se obtuvo el permiso de los autores del cuestionario original para su adaptación cultural y colaboraron durante el proceso como asesores.

Resultados: La traducción del cuestionario original al español la realizaron traductores nativos que realizaron pequeñas modificaciones aceptadas por los autores de la versión original. Se realizó la retrotraducción al italiano, obteniendo una versión equivalente al EARP original. La versión española después de la retrotraducción se aplicó en el test de comprensión a 35 pacientes. Todos ellos contestaron a todos los ítems sin hacer aportaciones adicionales. Conclusión: La adaptación cultural del cuestionario EARP para población española constituye la primera etapa para su posterior uso en práctica clínica habitual. La aplicación de una metodología estandarizada garantiza la equivalencia entre el EARP en español y el original. En una segunda etapa se realizará la validación en población española.

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Introduction

Psoriatic arthritis (PsA) is a chronic inflammatory disease in which psoriasis is associated with a variety of clinical and radiologic signs that are not exclusive to this diagnosis.1-3 The estimated prevalence ranges from 0.02% to 0.42%4-6 and the incidence from 3.4 to 8 cases per 100,000 population per year.7,8 About 30% of patients with psoriasis may have PsA.9

The diagnosis of this disease is complicated by the variety of clinical presentations and its similarity to other joint diseases. Two patient profiles can be defined. One type of patient develops early arthritis and is generally followed by a rheumatologist; another will initially present with skin involvement and is usually followed by a dermatologist but will develop arthritis later.10 A recent study in 7 countries found that a third of patients with psoriasis treated in dermatology clinics also had PsA.11 The dermatologist must therefore be able to identify signs suggestive of this disease so that the patient can be referred to a rheumatologist for early control of joint involvement.12-14 This multidisciplinary approach to PsA means that the main specialists treating these patients require valid diagnostic tools for use in routine clinical practice.14,15

The various self-administered questionnaires for detecting PsA cases include the Psoriatic Arthritis Screening and Evaluation and Toronto Psoriatic Arthritis Screening questionnaires.16,17 The former has been validated for use in Spanish populations.18 A study comparing the ability of these tools to detect cases found that their specificity in clinical use was lower than that reported in the initial validation studies and also lower than the levels considered clinically useful.19 Moreover, these instruments were less sensitive in patients with lower levels of disease activity, fewer joint symptoms, or recent onset of disease.19 This situation means they cannot contribute to early case detection.13

The Early Arthritis for Psoriatic Patients (EARP) questionnaire20 has been shown to have good measurement properties in its original version in Italian. The main advantages of the EARP over the previously mentioned questionnaires are that it is simple and can be administered quickly, features that make a tool useful to practicing dermatologists.21 Furthermore, the initial validation study for the EARP showed that it identified a large percentage of the patients who had not previously reported PsA symptoms. The Spanish version we present in this article has undergone such a validation study; the results are consistent with those findings and a report should be published soon. The availability of a culturally adapted and validated Spanish version of the EARP should prove useful for managing patients with psoriasis in Spain.

Literally translated questionnaires can contain erroneous interpretations because of cultural differences between countries. Before a translated questionnaire is used in a new population, it must undergo a process of cultural adaptation of the language and the translated tool’s measurement properties must be appropriately validated. The International Society of Pharmacoeconomics and Outcomes Research (ISPOR) provides a standardized method for the translation, cultural adaptation, and linguistic validation of clinical tools.22

Our aim here is to report the process we followed to culturally adapt a version of the EARP questionnaire suitable for use in a Spanish population.

Material and Methods

The Questionnaire

The EARP, whose purpose is to detect PsA in patients with psoriasis, was developed based on a review of the signs and
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