



REVISTA BRASILEIRA DE REUMATOLOGIA

www.reumatologia.com.br



Original article

Determinants of quality of life in Paget's disease of bone

Gláucio Ricardo Werner de Castro ^{a,b,*}, Silvana Ana Fernandes de Castro ^{c,d},
 Ivanio Alves Pereira ^{a,e}, Adriana Fontes Zimmermann ^{b,e}, Maria Amazile Toscano ^f,
 Fabricio Souza Neves ^e, Maria Aparecida Scottini ^a, Juliane Paupitz ^b,
 Julia Salvan da Rosa ^g, Ziliani Buss ^g, Tânia Silvia Fröde ^g

^a Universidade do Sul de Santa Catarina, Faculdade de Medicina, Palhoça, SC, Brazil

^b Hospital Governador Celso Ramos, Unidade de Reumatologia, Florianópolis, SC, Brazil

^c Universidade do Vale do Itajaí, Faculdade de Psicologia, Itajaí, SC, Brazil

^d Universidade do Sul de Santa Catarina, Faculdade de Fisioterapia, Tubarão, SC, Brazil

^e Universidade Federal de Santa Catarina, Hospital Universitário, Unidade de Reumatologia, Florianópolis, SC, Brazil

^f Centro Catarinense de Reabilitação, Florianópolis, SC, Brazil

^g Universidade Federal de Santa Catarina, Centro de Ciências da Saúde, Departamento de Análises Clínicas, Florianópolis, SC, Brazil

ARTICLE INFO

Article history:

Received 6 June 2016

Accepted 26 April 2017

Available online xxxx

Keywords:

Paget's disease of bone

Quality of life

SF-36

WHOQOL-bref

ABSTRACT

Objective: To evaluate the parameters associated with quality of life in patients with Paget's disease of bone.

Methods: Patients with Paget's disease of bone were evaluated with SF-36 and WHOQOL-bref questionnaires. Patients with other diseases that could cause significant impairment of their quality of life were excluded. We searched for correlations between the results and: age, time from diagnosis, type of involvement, pain related to Paget's disease of bone, limitation to daily activities, deformities, bone specific alkaline phosphatase, the extent of involvement and treatment.

Results: Fifty patients were included. Results of the SF-36 total score and its domains, physical and mental health, were significantly correlated with bone pain and deformities. Marital status was significantly correlated with the SF-36 total score and Mental Health Domain. BAP levels and disease extension were significantly correlated to SF-36 Physical Health Domain. After multivariate analysis, the only parameters that remained significantly associated with the SF-36 total score and to its Mental Health and Physical Health Domains were pain and marital status.

The WHOQOL-bref total score was significantly associated with pain, physical impairment and deformities. WHOQOL-bref Domain 1 (physical) score was significantly associated with marital status, pain and deformities, while Domain 2 (psychological) score was associated with marital status, physical impairment and kind of involvement. After multivariate analysis, the presence of pain, deformities, and marital status were significantly associated with

* Corresponding author.

E-mail: castrogrwc@gmail.com (G.R. Castro).

<http://dx.doi.org/10.1016/j.rbre.2017.06.002>

2255-5021/© 2017 Elsevier Editora Ltda. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

results of the WHOQOL-bref total score and its Domain 1. WHOQOL-bref domain 2 results were significantly predicted by pain and marital status.

Conclusion: The main disease-related factor associated with SF-36 results in Paget's disease of bone patients was bone pain, while bone pain and deformities were associated with WHOQOL-bref.

© 2017 Elsevier Editora Ltda. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

Determinantes da qualidade de vida na doença de Paget óssea

R E S U M O

Palavras-chave:

Doença de Paget óssea

Qualidade de vida

SF-36

WHOQOL-bref

Objetivo: Avaliar os parâmetros associados à qualidade de vida em pacientes com doença de Paget óssea (DPO).

Métodos: Avaliaram-se pacientes com DPO com os questionários SF-36 e WHOQOL-bref. Excluíram-se pacientes com outras doenças que pudessem causar comprometimento significativo da qualidade de vida. Buscou-se por correlações entre os resultados e idade, tempo de diagnóstico, tipo de envolvimento, dor relacionada com a DPO, limitação às atividades diárias, deformidades, fosfatase alcalina específica do osso, extensão do envolvimento e tratamento.

Resultados: Incluíram-se 50 pacientes. Os resultados da pontuação total do SF-36 e seus domínios, saúde física e saúde mental, se correlacionaram significativamente com a dor óssea e deformidades. O estado civil se correlacionou significativamente com a pontuação total do SF-36 e com seu domínio saúde mental. Os níveis de BAP e a extensão da doença se correlacionaram significativamente com o domínio saúde física do SF-36. Depois da análise multivariada, os únicos parâmetros que permaneceram significativamente associados à pontuação total do SF-36 e aos seus domínios saúde mental e saúde física foram a dor e o estado civil. A pontuação total do WHOQOL-bref esteve significativamente associada à dor, ao comprometimento físico e a deformidades. O escore do Domínio 1 (físico) do WHOQOL-bref esteve significativamente associado ao estado civil, dor e deformidades, enquanto o Domínio 2 (psicológico) esteve associado ao estado civil, comprometimento físico e tipo de envolvimento. Depois da análise multivariada, a presença de dor, deformidades e estado civil esteve significativamente associada à pontuação total do WHOQOL-bref e à pontuação do seu Domínio 1. Os resultados do WHOQOL-bref 2 foram significativamente preditos pela dor e pelo estado civil.

Conclusão: O principal fator associado aos escores do SF-36 foi a dor óssea, enquanto a dor óssea e as deformidades estiveram associadas ao WHOQOL-bref.

© 2017 Elsevier Editora Ltda. Este é um artigo Open Access sob uma licença CC BY-NC-ND (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

Introduction

Paget's disease of bone (PDB) is a common osteometabolic disease characterized by increased and disorganized bone turnover. It is usually asymptomatic but may cause bone pain, fractures, deformities, secondary osteoarthritis, neurologic and cardiac complications and, in rare cases, neoplasm.^{1,2} These complications can adversely affect the quality of life (QoL) of the symptomatic PDB patient. Therefore, studies evaluating QoL in PDB patients and the effects of PDB treatment in QoL have been published.³⁻¹⁰

Few of these studies have focused on determinants of QoL in this population, but this knowledge is important in the evaluation of treatment effects on QoL. If the parameters related with poor QoL are affected by currently available treatments, an increase in QoL is expected after the treatment. On the other hand, if some important parameters are not influenced

by PDB's treatment, then, measures of QoL would have a limited role in the evaluation of different therapeutic options. This could help to understand the heterogeneous results of PDB treatment in QoL in different studies.^{4,5,10}

The present study was undertaken to evaluate parameters associated with QoL in PDB patients.

Methods

Consecutive patients with PDB followed by rheumatologists in Florianopolis, Brazil, were included after signing an informed consent term. Patients were followed at one public hospital (Hospital Governador Celso Ramos) or at the author's private offices. Exclusion criteria were: incapacity to understand the questionnaires and presence of any other chronic disease that may adversely affect QoL, including: depression, dementia, systemic inflammatory diseases, primary osteoarthritis

دريافت فوري

متن كامل مقاله



- ✓ امكان دانلود نسخه تمام مقالات انگلیسي
- ✓ امكان دانلود نسخه ترجمه شده مقالات
- ✓ پذيرش سفارش ترجمه تخصصي
- ✓ امكان جستجو در آرشيو جامعى از صدها موضوع و هزاران مقاله
- ✓ امكان دانلود رايگان ۲ صفحه اول هر مقاله
- ✓ امكان پرداخت اينترنتى با کليه کارت های عضو شتاب
- ✓ دانلود فوري مقاله پس از پرداخت آنلاين
- ✓ پشتيباني كامل خريد با بهره مندي از سيسitem هوشمند رهگيری سفارشات