

NATIONAL MEDICAL CENTER AND BECKMAN RESEARCH INSTITUTE

Quality of Life Instrument - Breast Cancer Patient Version

Dear Colleague:

The Quality of Life Instrument (BREAST CANCER PATIENT VERSION) is a forty-six item ordinal scale that measures the Quality of Life of a breast cancer patient. This tool can be useful in clinical practice as well as for research. This instrument can be administered by mail or in person. It is based on our previous research and was adapted to represent the special QOL needs of breast cancer survivors.

Directions: The patient is asked to read each question and decide if she agrees with the statement or disagrees. The patient is then asked to circle a number to indicate the degree to which he/she agrees or disagrees with the statement according to the word anchors on each end of the scale.

The scoring should be based on a scale of 0 = worst outcome to 10 = best outcome. Several items have reverse anchors and therefore when you code the items you will need to reverse the scores of those items. For example, if a subject circles "3" on such an item, (10-3 = 7) thus you would record a score of 7. The items to be reversed are: 1-7, 9, 10, 17-29, 31, 33-39 & 43. Subscales can be created for analysis purposes by adding all of the items within a subscale and creating a mean score.

You are welcome to use this instrument in your research/clinical practice to gain information about Quality of Life of breast cancer patients. You have permission to duplicate this tool.

The QOL Breast Cancer instrument is based on previous versions of the QOL instrument by researchers at the City of Hope National Medical Center. The revised instrument includes 46 items representing the four domains of quality of life including physical well being, psychological well being, social well being and spiritual well being. The study was conducted as a mail survey to the membership of the National Coalition for Cancer Survivorship. The total N was 686 and 294 of these were breast cancer survivors. This survey included a Demographic tool, the QOL tool and the FACT-G tool developed by Cella. Psychometric analysis was performed on 686 respondents including measures of reliability and validity. Two measures of reliability included test re-test and internal consistency. In order to perform test re-test reliability, a randomly selected sample of 150 subjects who completed the initial QOL survey were asked to repeat this tool approximately two weeks later. 110 of the 150 subjects responded for an overall response of 73%. Of the 110 respondents, only those with complete data sets on all variables were used (N=70). The overall QOL-CS tool test re-test reliability was .89 with subscales of physical r=.88, psychological r=.88, social r=.81, spiritual r=.90 . The second measure of reliability was computation of internal consistency using Cronbach's alpha co-efficient as a measure of agreement between items and subscales. Analysis revealed an overall r=.93. Subscale alphas ranged from r=.71 for spiritual well being, r=.77 for physical, r=.81 for social, and r=.89 for psychological.

Several measures of validity were used to determine the extent to which the instrument measured the concept of QOL in cancer survivors. The first method of content validity was based on a panel of QOL researchers and nurses with expertise in oncology. The second measure used stepwise multiple regression to determine factors most predictive of overall QOL in cancer survivors. Seventeen variables where found to be statistically significant accounting for 91% of the variance in overall QOL. Variables accounting for the greatest percentage were control, aches and pain, uncertainty, satisfaction, future, appearance and fatigue. The fourth measure of validity used Pearson's correlations to estimate the relationships between the subscales of the QOL-CS and the subscales of the established FACT-G tool. There was moderate to strong correlation between associated scales including QOL-CS Physical to FACT Physical (r=.74), QOL-CS Psych to FACT Emotional (r=.65), QOL Social to FACT Social (r=.44). The overall QOL-CS correlation with the FACT-G was .78. Additional measures of validity included correlations of individual items of the QOL-CS tool, Factor Analysis, and Construct Validity discriminating known groups of cancer survivors. This psychometric data is reported in references 1 and 2.

The instrument has also been used in breast cancer survivors in several City of Hope studies (references 3-8).

Good luck with your research!!

Sincerely,

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- 1. Ferrell BR, Dow KH, Grant M. "Measurement of the quality of life in cancer survivors." <u>Quality of Life</u> <u>Research</u>, 1995; 4:523-531.
- 2. Ferrell BR, Hassey-Dow K, Leigh S, Ly J, Gulasekaram P. "Quality of life in long-term cancer survivors." <u>Oncology Nursing Forum</u>, 1995; 22(6):915-922.
- 3. Ferrell BR, Grant M, Funk B, Garcia N, Otis-Green S, Schaffner MLJ. "Quality of life in breast cancer." <u>Cancer Practice</u>, 1996; 4(6):331-340.
- 4. Hassey-Dow K, Ferrell BR, Leigh S, Ly J, Gulasekaram P. "An evaluation of the quality of life among longterm survivors of breast cancer." <u>Breast Cancer Research and Treatment</u>, 1996; 39:261-273.
- 5. Ferrell BR, Grant MM, Funk B, Otis-Green S, Garcia N. "Quality of life in breast cancer survivors as identified by focus groups." <u>Psycho-Oncology</u>, 1997; 6:13-23.
- Ferrell BR, Grant M, Funk B, Otis-Green S, Garcia N. "Quality of life in breast cancer Part I: Physical and social well being." <u>Cancer Nursing</u>, 1997; 20(6):398-408.
- 7. Ferrell BR, Grant M, Funk B, Otis-Green S, Garcia N. "Quality of life in breast cancer Part II: Psychological and spiritual well being." <u>Cancer Nursing</u>, 1998; 21(1):1-9.
- Ferrell BR, Grant M, Funk B, Otis-Green S, Garcia N. "Quality of life in breast cancer survivors: Implications for developing support services." <u>Oncology Nursing Forum</u>, 1998; 25(5):887-895.

Quality of Life Scale/BREAST CANCER PATIENT

Directions: We are interested in knowing how your experience of having cancer affects your Quality of Life. Please answer all of the following questions based on your life <u>at this time</u>.

Please circle the number from 0 - 10 that best describes your experiences:

To what extent are the following a problem for you:

| 1. | Fatigue | | | | | | | | | | | |
|----|----------------|-------|-------|--------|------|------|---|---|---|---|---|-------------------|
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem |
| 2. | Appetite chang | ges | | | | | | | | | | |
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem |
| 3. | Aches or pain | | | | | | | | | | | |
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem |
| 4. | Sleep changes | | | | | | | | | | | |
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem |
| 5. | Weight gain | | | | | | | | | | | |
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem |
| 6. | Vaginal dryne | ss/me | enopa | usal s | ympt | toms | | | | | | |
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem |

| 7. | Menstrual changes or fertility | | | | | | | | | | | | |
|------------|---|---------------|----------|---------|---------------|-------|-------|--------|---------|---|---|-------------------|--|
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem | |
| 8. | Rate your over | all ph | ysica | l heal | th | | | | | | | | |
| | extremely poor | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 excellent | |
| <u>Psy</u> | Psychological Well Being Items | | | | | | | | | | | | |
| 9. | How difficult is it for you to cope today as a result of your disease? | | | | | | | | | | | | |
| | not at all difficult | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very difficult | |
| 10. | . How difficult is it for you to cope today as a result of your treatment? | | | | | | | | | | | | |
| | not at all difficult | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very difficult | |
| 11. | How good is ye | our qu | ality | of life | e? | | | | | | | | |
| | extremely poor | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 excellent | |
| 12. | How much hap | pines | s do y | you fe | el? | | | | | | | | |
| | none at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |
| 13. | Do you feel like | e you | are in | ont | rol of | situa | tions | in you | ır life | ? | | | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 completely | |
| 14. | How satisfying | g is yo | our life | e? | | | | | | | | | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 completely | |

| 15. | How is your present ability to concentrate or to remember things? | | | | | | | | | | | | |
|-----|---|--------|---|---|---|---|---|---|---|---|---|---------------------|--|
| | extremely poor | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 excellent | |
| 16. | How useful do you feel? | | | | | | | | | | | | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 extremely | |
| 17. | Has your illness or treatment caused changes in your appearance ? | | | | | | | | | | | | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 extremely | |
| 18. | Has your illness or treatment caused changes in your self concept (the way you see yourself)? | | | | | | | | | | | | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 extremely | |
| | How distressing were the following aspects of your illness and treatment? | | | | | | | | | | | | |
| 19. | Initial diagnosis | 5 | | | | | | | | | | | |
| | not at all distressing | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very distressing | |
| 20. | Cancer chemot | herapy | Ŷ | | | | | | | | | | |
| | not at all distressing | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very distressing | |
| 21. | Cancer radiatio | n | | | | | | | | | | | |
| | not at all distressing | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very distressing | |
| 22. | Cancer surgery | | | | | | | | | | | | |
| | not at all distressing | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very distressing | |

| 23. | Completion of | f trea | tmen | t | | | | | | | | | | |
|---|---|---------|---------|--------|---------|--------|----------------|------|-----|---|---|---------------------|--|--|
| | not at all distressing | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very distressing | | |
| 24. | How much anxiety do you have? | | | | | | | | | | | | | |
| | none at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | | |
| 25. | How much depression do you have? | | | | | | | | | | | | | |
| | none at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | | |
| To what extent are you <u>fearful</u> of: | | | | | | | | | | | | | | |
| 26. | Future diagno | ostic t | ests | | | | | | | | | | | |
| | no fear | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 extreme fear | | |
| 27. | A second cano | er | | | | | | | | | | | | |
| | no fear | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 extreme fear | | |
| 28. | Recurrence of | f canc | er | | | | | | | | | | | |
| | no fear | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 extreme fear | | |
| 29. | Spreading (m | etasta | asis) o | of you | r can | cer | | | | | | | | |
| | no fear | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 extreme fear | | |
| 30. | To what degree | e do y | you fe | el you | ır life | is bac | ck to r | orma | al? | | | | | |
| | none at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | | |

Social Concerns

| 31. | How distressing has your illness been for your family ? | | | | | | | | | | | | |
|-----|--|----------------|--------|--------------|--------|---------|--------|---------|---------|---------|---------------|----------------------------|--|
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |
| 32. | Is the amoun | t of su | ippor | t you | recei | ve fro | m oth | ers su | ıfficie | nt to | meet y | vour needs? | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |
| 33. | Is your conti | nuing | healt | h care | inter | fering | with | your] | perso | nal re | elation | nships? | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |
| 34. | Is your sexuality impacted by your illness? | | | | | | | | | | | | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |
| 35. | To what degree has your illness and treatment interfered with your employment ? | | | | | | | | | | | | |
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem | |
| 36. | To what deg | ree ha | s you | r illne | ss and | d treat | ment | interf | ered v | vith y | our ac | ctivities at home? | |
| | no problem | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 severe problem | |
| 37. | How much is | solatio | on do | you f | eel is | cause | d by y | your il | llness | ? | | | |
| | none | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |
| 38. | How much c breast cancer | | n do | you h | ave fo | or you | r daug | ghter(| s) or c | other o | close f | female relatives regarding | |
| | none at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |
| 39. | How much f | inanci | ial bu | rden | have | you ir | ncurre | ed as a | ı resul | t of y | our ill | ness and treatment? | |
| | none | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal | |

Spiritual Well Being

| 40. | . How important to you is your participation in religious activities such as praying, going to church or temple? | | | | | | | | | | | h as praying, |
|-----|---|--|----------------|--------|---------------|---------------|--------|---------|---------------|--------|--------------------|-------------------|
| | not at all important | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very important |
| 41. | How importa | low important to you are other spiritual activities such as meditation or prayir | | | | | | | | | n or praying? | |
| | not at all important | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very important |
| 42. | How much ha | as you | ır spiı | ritual | life c | hange | ed as | a resu | lt of c | cancer | [.] diagi | nosis? |
| | less important | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 more important |
| 43. | How much uncertainty do you feel about your future? | | | | | | | | | | | |
| | not at all uncertain | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very uncertain |
| 44. | To what exter | nt has | your | illnes | s mac | le pos | itive | chan | ges in | your | life? | |
| | none at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal |
| 45. | Do you sense | a pu i | rpose | /miss | ion fo | or you | r life | or a re | eason | for be | ing a | live? |
| | none at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 a great deal |
| 46. | How hopeful | l do yo | ou fee | 21? | | | | | | | | |
| | not at all | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 very hopeful |

Ferrell, Grant, Hassey-Dow, 1995