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RELATIONSHIP BETWEEN HEALTH-RELATED QUALITY OF LIFE IN PATIENTS WITH INTERSTITIAL LUNG DISEASES AND COPD

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ABSTRACT

BACKGROUND:

Quality of life (QOL) and health condition are often subjects of investigation in pulmonary patients. There is a correlation of QOL and pulmonary function tests, but that doesn't present whole medical status. We compared quality of life in patients with interstitial lung disease (ILD) and chronic obstructive pulmonary disease (COPD), with similar severity of ventilation disturbances, with the use of questionnaires.

AIMS: Reliability of questionnaires in assessment of quality of life and their correlation with pulmonary function tests, 6-minute walking test, Borg scale of dyspnea and partial oxygen pressure (pO₂) before and after the exertion.

METHODS:

Retrospective survey of quality of life in patients with interstitial lung diseases (N=85, with medium grade restrictive disturbances of ventilation) and patients with COPD (N=85, with medium grade obstructive disturbances of ventilation) was conducted in Clinic for Pulmonology Jordanovac, University Hospital Center Zagreb.

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General questionnaire WHOQOL-BREF and St. George's Respiratory Questionnaire (SGRQ) were used for assessment of QOL.

RESULTS:

Groups had statistically significant difference regarding age (patients with interstitial lung diseases (ILD) were younger, $p < 0,0001$), gender (there were more men in COPD group, $p = 0,00174$) and smoking habits ($p = 0,0001$). Considerably more smokers were in the COPD group.

Between groups statistically significant difference was verified for all functional parameters ($p < 0,00001$).

Partial oxygen pressure (pO_2) before and after the 6-minute walking test was lowest in patients with ILD.

After exertion, in patients with ILD, there was a statistically significant decrease of pO_2 (4%), whereas in patients with COPD decrease wasn't statistically significant (2%).

Patients with ILD had lower DL_{CO} ($p < 0,00001$). Six-minute walking test and Borg scale of dyspnea before and after exertion showed no statistically significant difference between groups ($p < 0,05$).

Results of quality of life were statistically significantly better in patients with ILD than in patients with COPD regarding average score of WHOQOL-BREF ($p = 0,00515$), whereas there was no difference between groups regarding comparison with SGRQ ($p > 0,05$).

CONCLUSIONS:

Statistically significant difference was verified for all functional parameters between groups except for difference of pO_2 .

In relation to COPD patients, patients with ILD had significantly better average score of WHOQOL-BREF questionnaire, while no difference was found regarding total score of overall health status according to SGRQ.