

Translation and cultural adaptation of 15D quality of life questionnaire from English to Romanian language

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ABSTRACT

The quality of life of the patients is an increasingly used measure in order to cope with the biological and clinical measures of the disease.

The need for this is important for a correct assessment of the quality of medical services, the effectiveness of interventions and the cost utilization analysis.

Keywords: quality of life, patients, quality of care, questionnaire.

INTRODUCTION

The aim of the study is to translate the 15D quality of life questionnaire into the Romanian language.

Also, a key step of the process of translation is the cultural adaptation of the questionnaire to the Romanian population, in order to perceive all the elements from the questions as they are in English.

The 15D is a quality of life questionnaire that contains 15 questions with a 5 response options scale, about what patients think regarding their health status.

As the WHO has defined quality of life as individuals' perception of their position in life in the context of the culture in which they live and relation to their goals¹.

RESULTS

Minor differences were encountered between the two forward translations.

The translators discussed these difference to form RO_Version One. This version was translated back to English. Some of the translations were more literal and we decided to keep the translation that is more fluent and easier to understand, resulting RO_Version Two.

The pilot test evaluated the clarity, naturalness, and adequacy of wording; also any item which responders thought was inappropriate was recorded by the researcher.

The mean age of interviewers was 42.32±20.36 years (range 21 to 75 years). They found the survey items easy to understand and respond to, with minor adjustments.

DISCUSSION

In the context of health research, quality of life goes further than just the health status of the patients. Moreover is a reflection of how people perceive and react to their health status and to other, nonmedical aspects of their lives.

The ability of a QoL instrument to detect clinically important changes is fundamental, particularly when comparing the relative costs and benefits of alternatives courses of action in the healthcare environment.

After applying the 15 D questionnaire to various patients, but also healthy people we encountered that the need of a QoL measurement is needed.

Also the 15D (Romanian version) is translated from a cultural point of view and has good indicators.

METHODS AND MATERIALS

The standard procedure used is the forward-backward translation with high qualified personnel. The study had two native speakers of the target language (Romanian) and two English natives, also bilingual in the Romanian language.

The translation coordinator compares the two forward translations and checks for misspelled word or mistakes. After each step of the translation, a report is made to note all the discrepancies found and to produce a single version of the questionnaire in the Romanian language.

Each report had 5 categories that need to be completed: semantic difficulties, conceptual difficulties, consistency (same expressions), scaling (same intensity) and cultural diversity.

The final version of the Romanian translated questionnaire was pilot tested on 25 respondents (8 patients and 17 healthy people) with different educational backgrounds (student, housewife, psychologist, doctor, driver, pharmacist or economist: 7 males and 18 females).

Each one of the patients/healthy people was interviewed separately and registered they're general impression of each item of the questionnaire. For each instruction the following was asked: "Did you have difficulty understanding the instructions?;What words do you find difficult to understand?; How would you express the questions in other words?";



Figure 1. 15D Questionnaire in English



Figure 2. 15D translated in Romanian

Patient No	Age	Gender (male/female)	Profession	Patient or healthy individual (if patient, please specify)	Time of completion
1.	23	female	student	Healthy individual	16min
2.	21	female	student	Healthy individual	16min
3.	22	female	student	Healthy individual	16min
4.	22	female	Student	Healthy individual	15min
5.	21	female	Student	Healthy individual	16min
6.	23	female	student	Healthy individual	16min
7.	22	female	student	Healthy individual	16min
8.	22	female	student	Healthy individual	16min
9.	25	female	student	Healthy individual	16min
10.	32	female	pharmacist	Healthy individual	5min
11.	40	female	pharmacist	Healthy individual	4min
12.	42	male	engineer	Healthy individual	10min
13.	40	female	professor	Healthy individual	10min
14.	75	female	pensioner	patient	8min
15.	75	male	pensioner	patient	15min
16.	73	female	pensioner	patient	20min
17.	30	male	doctor	Healthy individual	10min
18.	57	male	engineer	Healthy individual	5min
19.	52	female	economist	Healthy individual	15min
20.	27	female	pharmacist	Healthy individual	6min
21.	63	male	pensioner	patient	10min
22.	65	male	pensioner	patient	13min
23.	67	female	pensioner	patient	8min
24.	47	male	psychologist	patient	7min
25.	72	female	pensioner	patient	10min
					Mean time: 11.96 min
					Median time: 13 min

Table 1. Cognitive debriefing of patients (data summary)

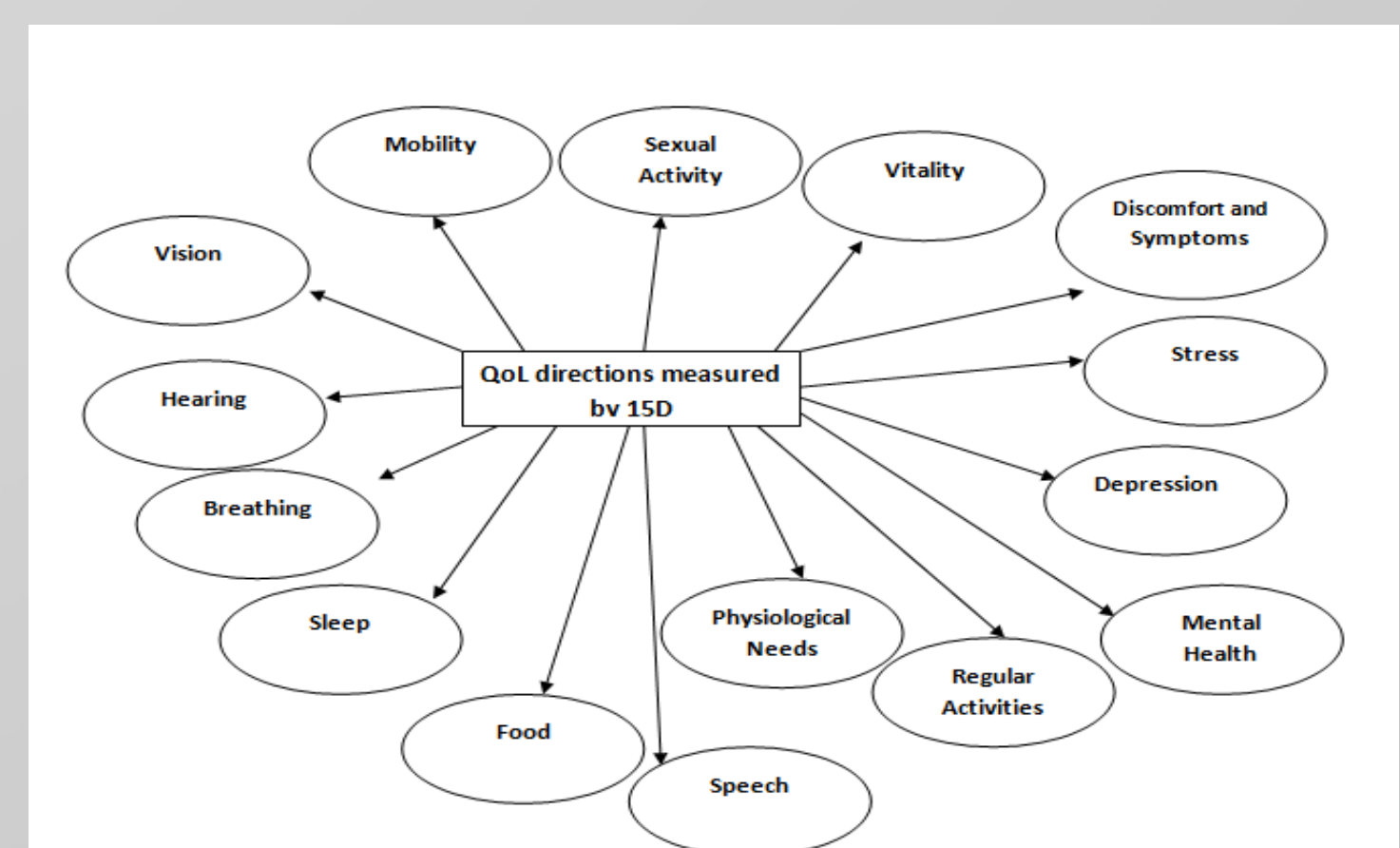


Figure 3. QoL directions measured by 15D

CONCLUSIONS

The Romanian version of the 15D quality of life questionnaire is a simple and quick screening tool with about 11.96±4.54 min administration time for measuring QoL.

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