

Pasientrapporterte utfall: Norsk kvalitetsregister for fedmekirurgi

(SOReG-N)

John Roger Andersen



Om Fagsenter for pasientrapporterte data

Det er ei målsetting at medisinske kvalitetsregistre skal bidra til ei betre helseteneste for befolkninga. Brukarmedverknad er sentralt i utviklinga av helsetenesta, og økt brukarorientering er eit helsepolitisk mål i Norge. Dette gjeld også for dei medisinske kvalitetsregistra.

[Les mer](#)

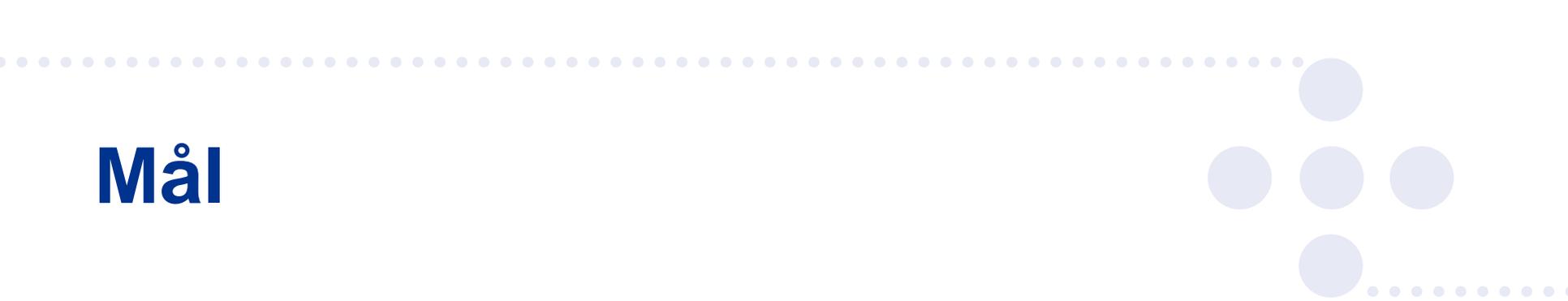
Kontaktinformasjon

Fagsenterets telefon: [55 57 58 96](tel:55575896)

E-post: sb_hbe_fagsfordata@ihelse.net

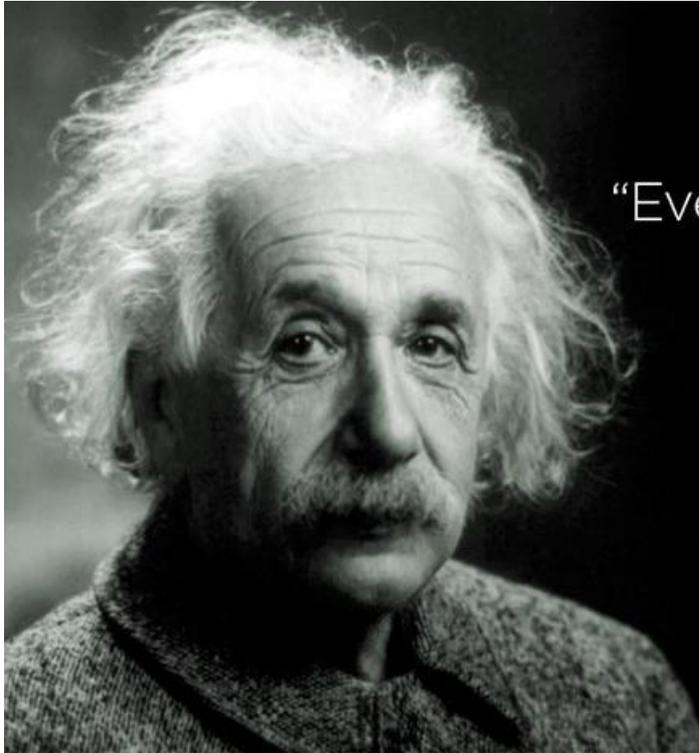


Tom Mala
Villy Våge

A decorative graphic at the top of the slide consists of a horizontal dotted line that ends in a cluster of five light blue circles. From the top-right corner, a dotted line extends horizontally to the right, then turns vertically down to the center of the circle cluster. The cluster contains five circles: one at the top, one in the middle-left, one in the middle-right, one in the middle-center, and one at the bottom.

Mål

- Relevant
- Valid
- Lett å administrere



“Everything should be made
as simple as possible.
But not simpler.”

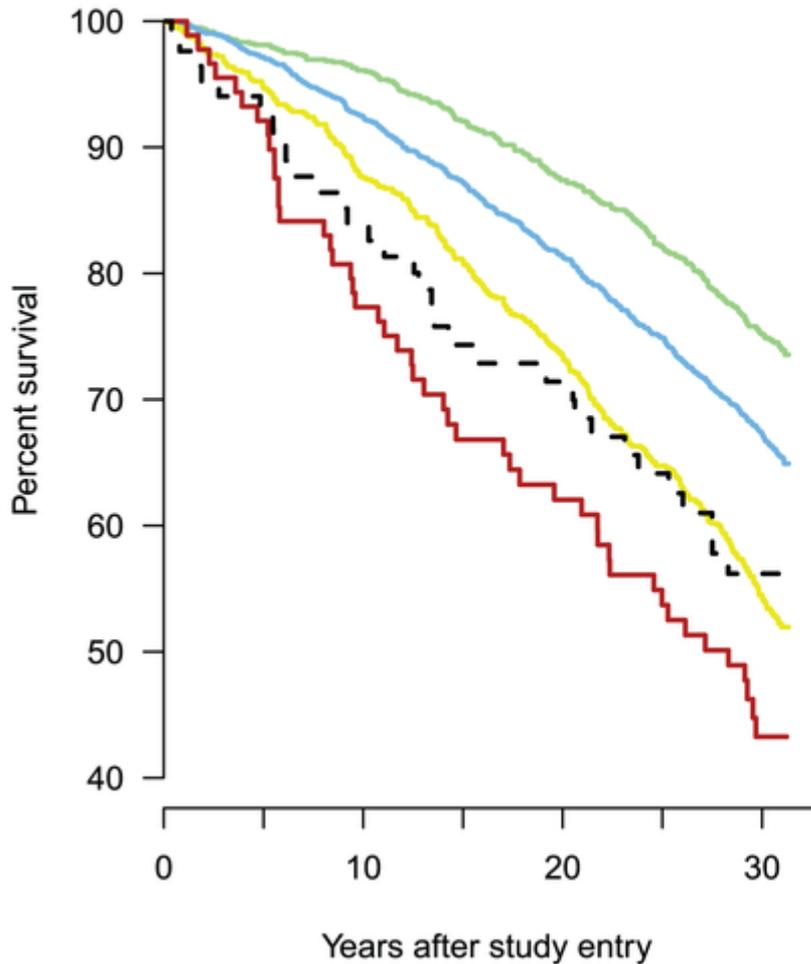
Albert Einstein

- Stort sett, vil du si helsen din er:

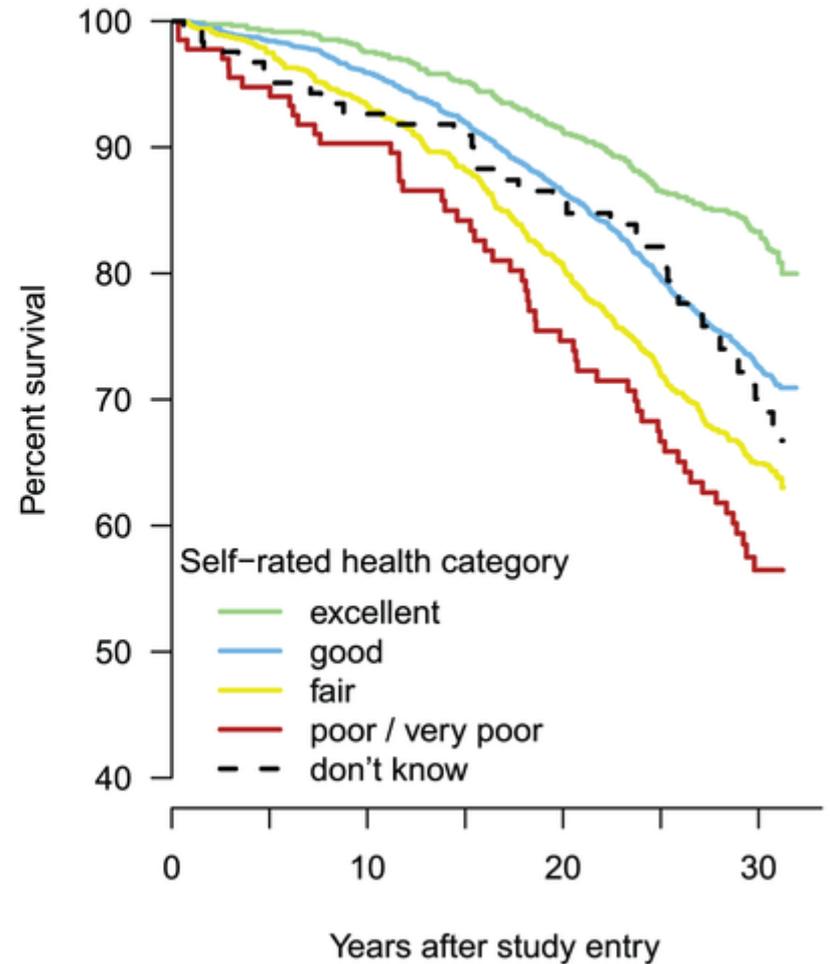
Utmerket	Veldig god	God	Nokså god	Dårlig
<input type="radio"/>				

Ware, J. E., Kosinski, M., & Gandek, B. (2000). SF-36 health survey : manual & interpretation guide (2 ed.). Lincoln, RI: QualityMetric Inc.

Men



Women



Bopp, M., Braun, J., Gutzwiller, F., Faeh, D., & Swiss National Cohort Study, G. (2012). Health risk or resource? Gradual and independent association between self-rated health and mortality persists over 30 years. *PLoS One*, 7(2), e30795. doi:10.1371/journal.pone.0030795

Livskvalitetsskjemaet PROS

Aasprang A, Kolotkin RL, Våge V, Andersen JR. Reliability and validity of a brief obesity-specific quality of life measure for use in clinical practice and for bariatric surgery registries. *Obes Surg* (2017) 27(Suppl 1): 1. <https://doi.org/10.1007/s11695-017-2774-7>.

- Føler du at din vekt eller kroppsform plager deg innenfor områdene nedenfor?
(kryss av det alternativet som passer best for deg i dagens situasjon)

Områder	Betydelig plaget	Moderat plaget	Mildt plaget	Ikke plaget
1. Vanlige fysiske aktiviteter (spasere, gå opp trapper og lignende)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Smerter i kroppen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Diskriminering eller ufin oppførsel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Søvn	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Seksualliv	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Vanlig sosial omgang	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Arbeid, skolegang eller andre daglige gjøremål	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Selvfølelse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

A decorative graphic consisting of a horizontal dotted line that ends in a cluster of five solid light-blue circles. The circles are arranged in a cross pattern: one in the center, one above, one below, one to the left, and one to the right. The dotted line continues to the right from the bottom circle.

Føremål

Utvikle og validere (saman med klinikarar og pasientar) eit kort og brukarvennleg QOL skjema for bruk i klinisk praksis

QOL skjema kan brukast i eit «staging-system»

EOSS: EDMONTON OBESITY STAGING SYSTEM - Staging Tool

STAGE 0

- **NO** sign of obesity-related risk factors
- **NO** physical symptoms
- **NO** psychological symptoms
- **NO** functional limitations

Case Example:

Physically active female with a BMI of 32 kg/m², no risk factors, no physical symptoms, no self-esteem issues, and no functional limitations.

Class I, Stage 0 Obesity

EOSS Score

WHO Obesity Classification

STAGE 1

- Patient has obesity-related **SUBCLINICAL** risk factors (borderline hypertension, impaired fasting glucose, elevated liver enzymes, etc.) - *OR* -
- **MILD** physical symptoms - patient currently not requiring medical treatment for comorbidities (dyspnea on moderate exertion, occasional aches/pains, fatigue, etc.) - *OR* -
- **MILD** obesity-related psychological symptoms and/or mild impairment of well-being (quality of life not impacted)

Case Example:

38 year old female with a BMI of 59.2 kg/m², borderline hypertension, mild lower back pain, and knee pain. Patient does not require any medical intervention.

Class III, Stage 1 Obesity

WHO CLASSIFICATION OF WEIGHT STATUS (BMI kg/m²)

Obese Class I 30 - 34.9
 Obese Class II 35 - 39.9
 Obese Class III ≥40

Stage 0 / Stage 1 Obesity

Patient **does not meet clinical criteria for admission** at this time. Please refer to primary care for further preventative treatment options.



STAGE 2

- Patient has **ESTABLISHED** obesity-related comorbidities requiring medical intervention (HTN, Type 2 Diabetes, sleep apnea, PCOS, osteoarthritis, reflux disease) - *OR* -
- **MODERATE** obesity-related psychological symptoms (depression, eating disorders, anxiety disorder) - *OR* -
- **MODERATE** functional limitations in daily activities (quality of life is beginning to be impacted)

Case Example:

32 year old male with a BMI of 36 kg/m² who has primary hypertension and obstructive sleep apnea.

Class II, Stage 2 Obesity

STAGE 3

- Patient has **significant** obesity-related end-organ damage (myocardial infarction, heart failure, diabetic complications, incapacitating osteoarthritis) - *OR* -
- **SIGNIFICANT** obesity-related psychological symptoms (major depression, suicide ideation) - *OR* -
- **SIGNIFICANT** functional limitations (eg: unable to work or complete routine activities, reduced mobility)
- **SIGNIFICANT** impairment of well-being (quality of life is significantly impacted)

Case Example:

49 year old female with a BMI of 67 kg/m² diagnosed with sleep apnea, CV disease, GERD, and suffered from stroke. Patient's mobility is significantly limited due to osteoarthritis and gout.

Class III, Stage 3 Obesity

STAGE 4

- **SEVERE** (potential end stage) from obesity-related comorbidities - *OR* -
- **SEVERELY** disabling psychological symptoms - *OR* -
- **SEVERE** functional limitations

Case Example:

45 year old female with a BMI of 54 kg/m² who is in a wheel chair because of disabling arthritis, severe hyperpnea, and anxiety disorder.

Class III, Stage 4 Obesity

Patient Reported Outcomes in Obesity (PROS)

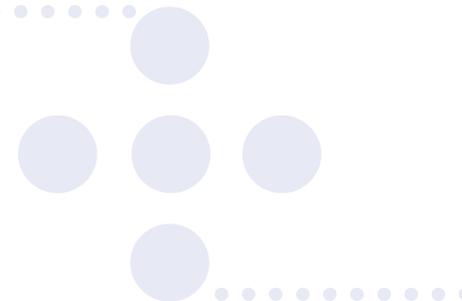
Føler du at di vekt eller kroppsform plagar deg innanfor områda nedanfor?
(kryss av det alternativet som passar best for deg i dagens situasjon)

Områder	Betydeleg plaga	Moderat plaga	Mildt plaga	Ikkje plaga
1. Vanlege fysiske aktivitetar (spasere, gå opp trapper og liknande)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. Smerter i kroppen	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. Diskriminering eller ufin oppførsel	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. Søvn	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. Seksualliv	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. Vanleg sosial omgang	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
7. Arbeid, skulegang eller andre daglege gjeremål	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
8. Sjølvkjensle	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

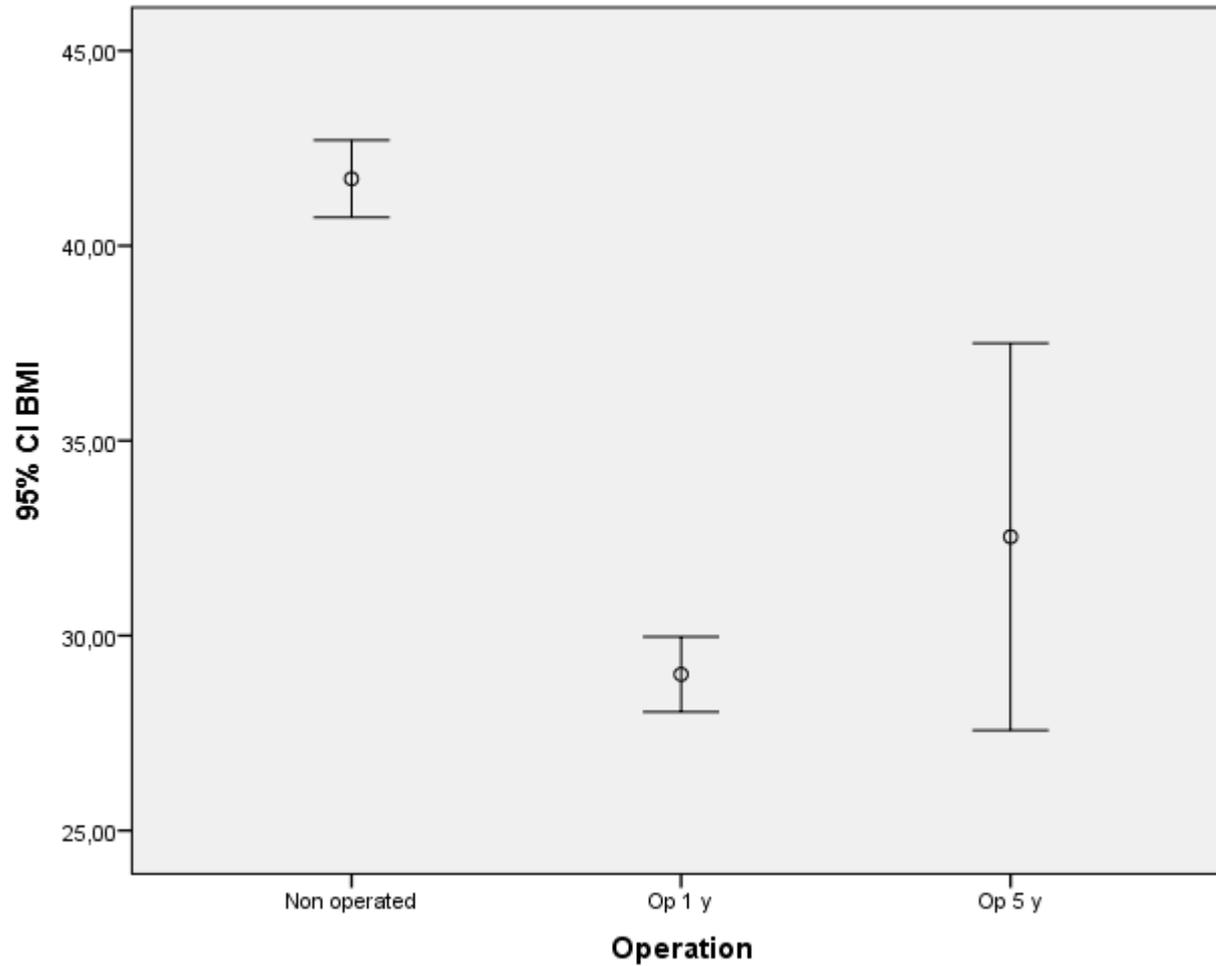
Utval

- N=204
- Før SG: n=109
- 1 år etter SG=n 89
- 5 år etter SG, n=11

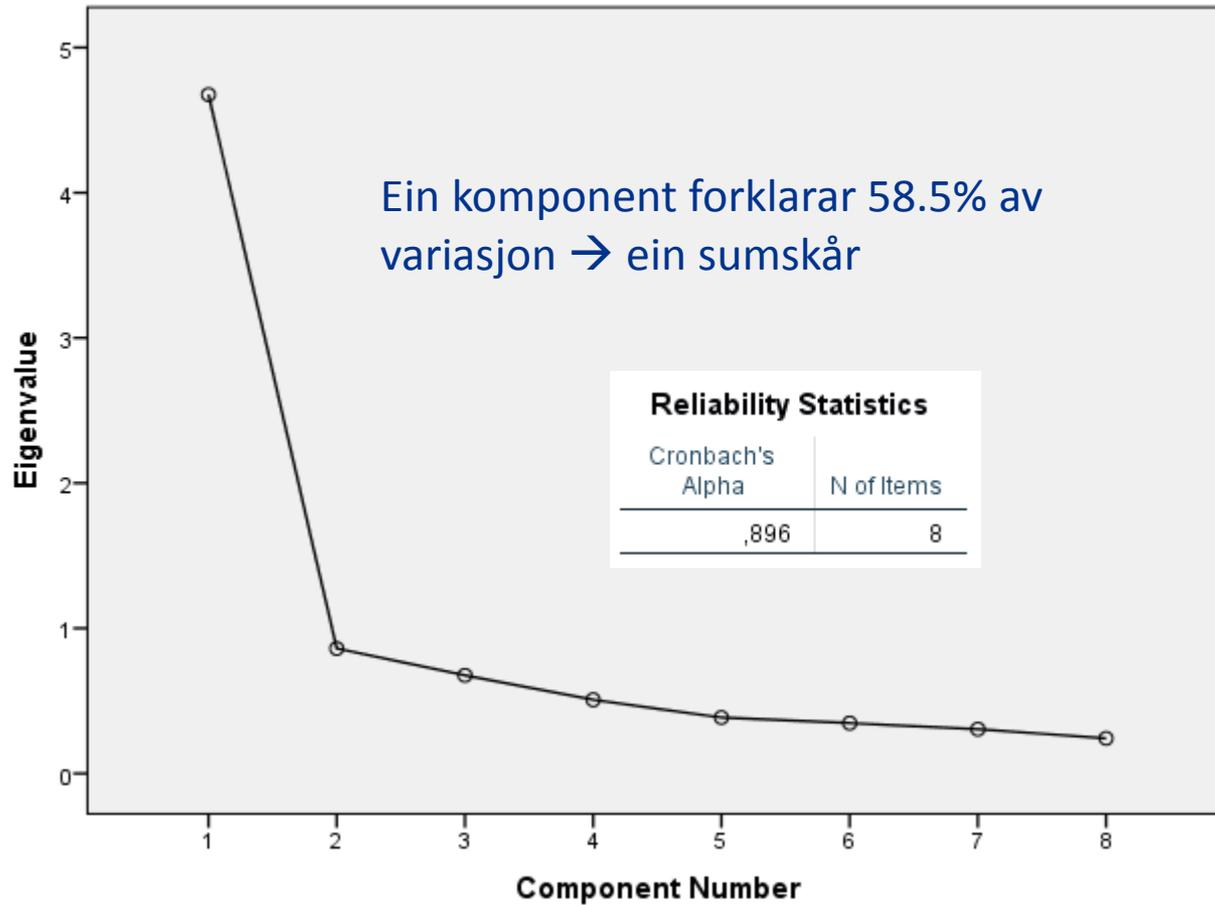
- Kvinner: 77%
- Alder <50 år: 63%



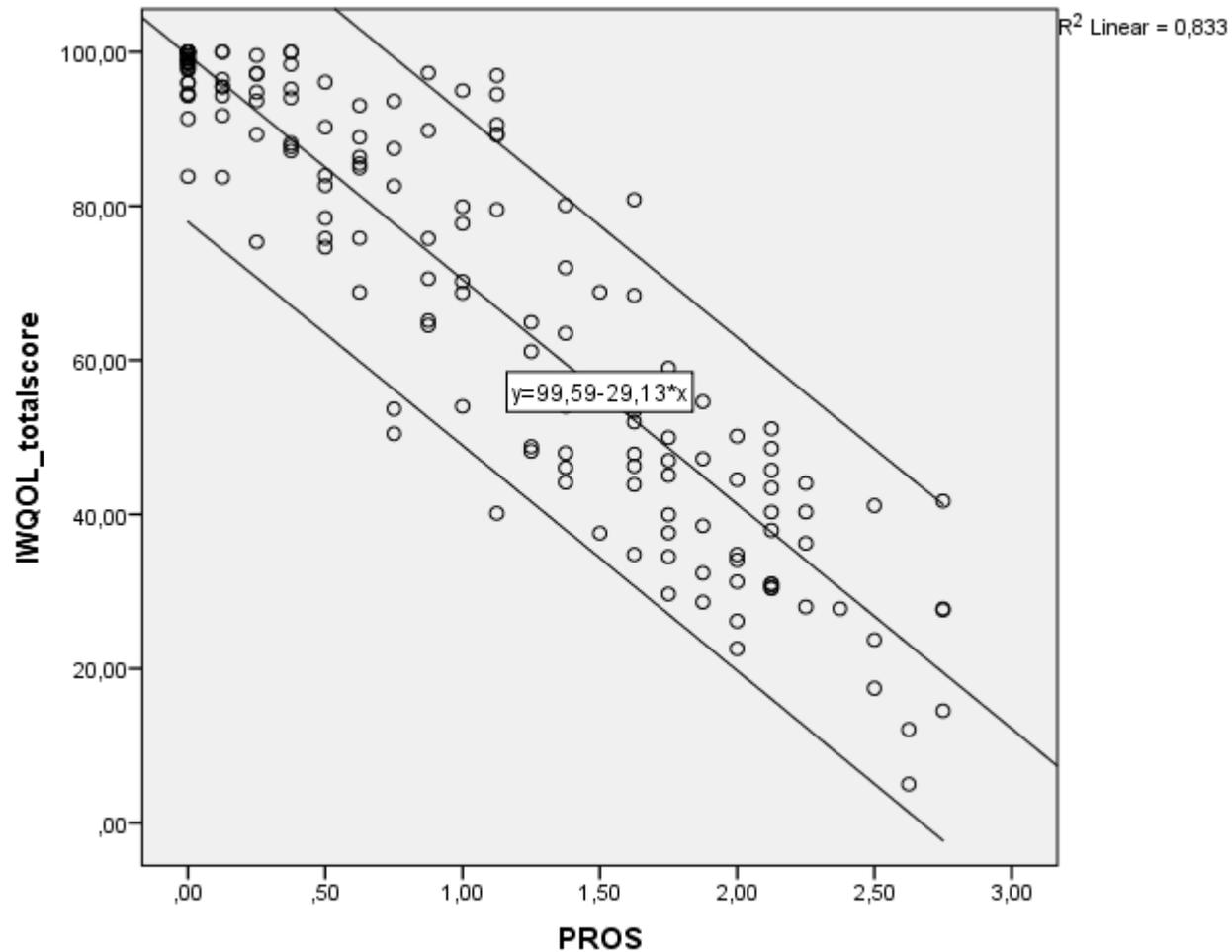
KMI (snitt, 95%KI)



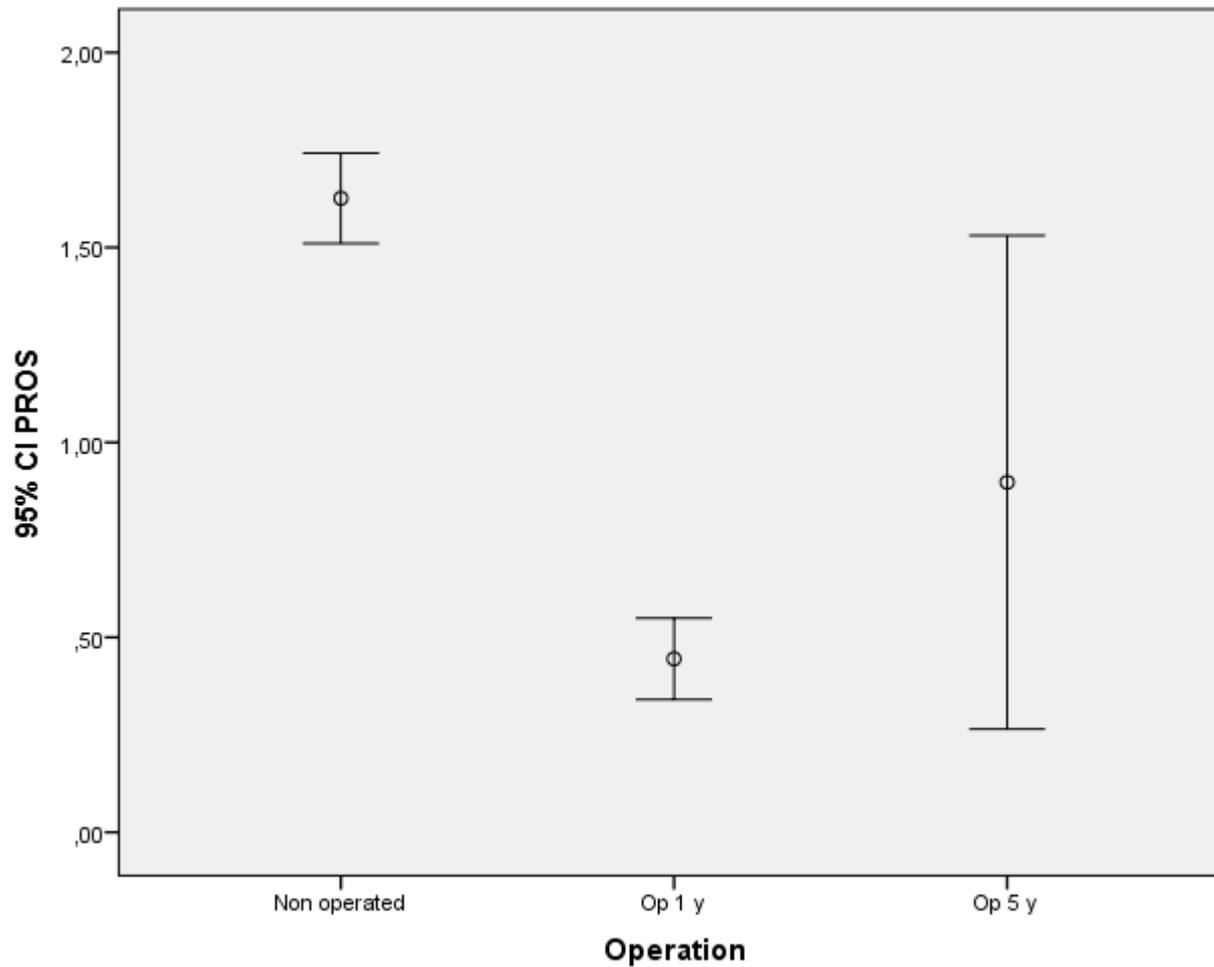
Scree Plot



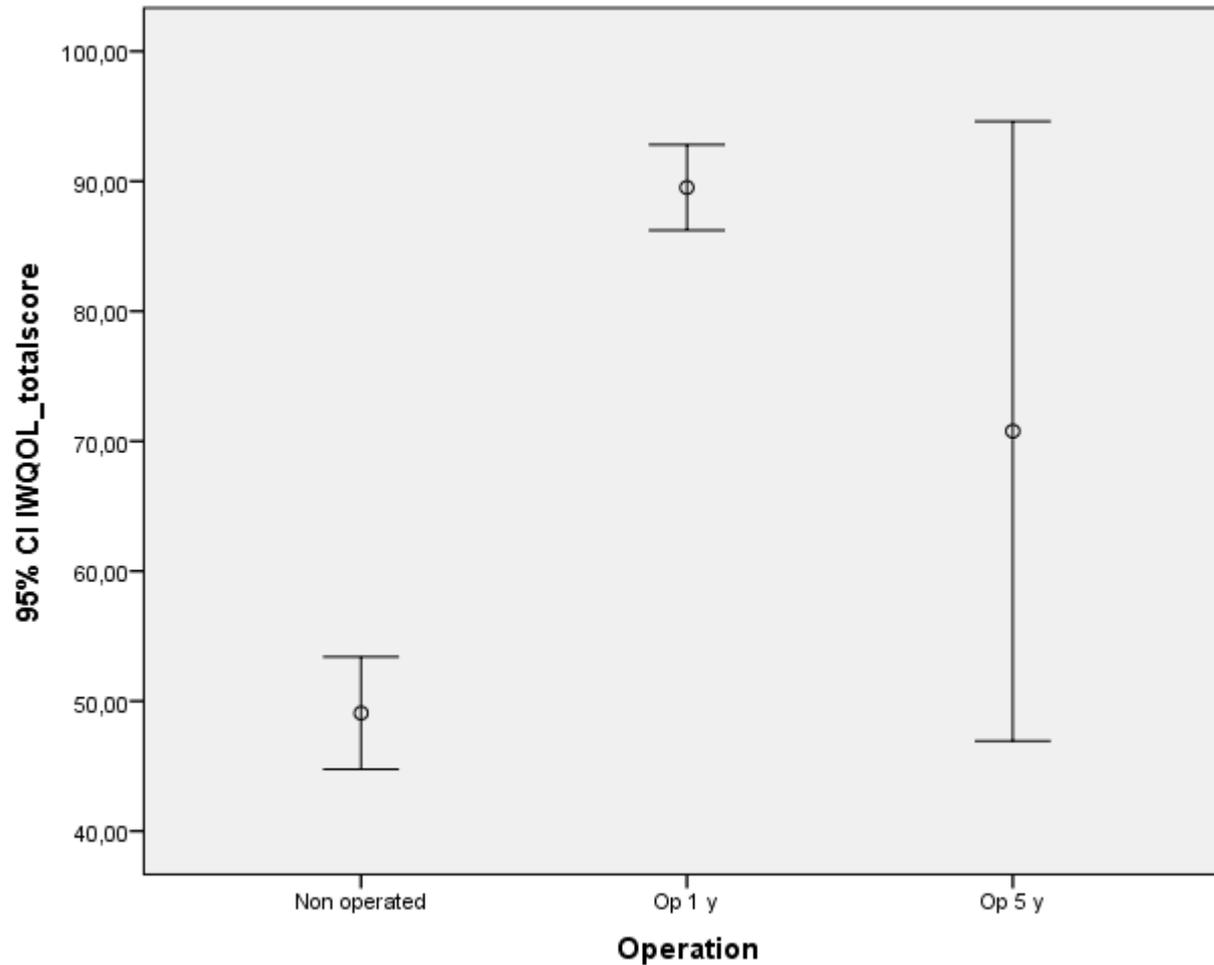
Korrelasjon mot gullstandard = 0.91



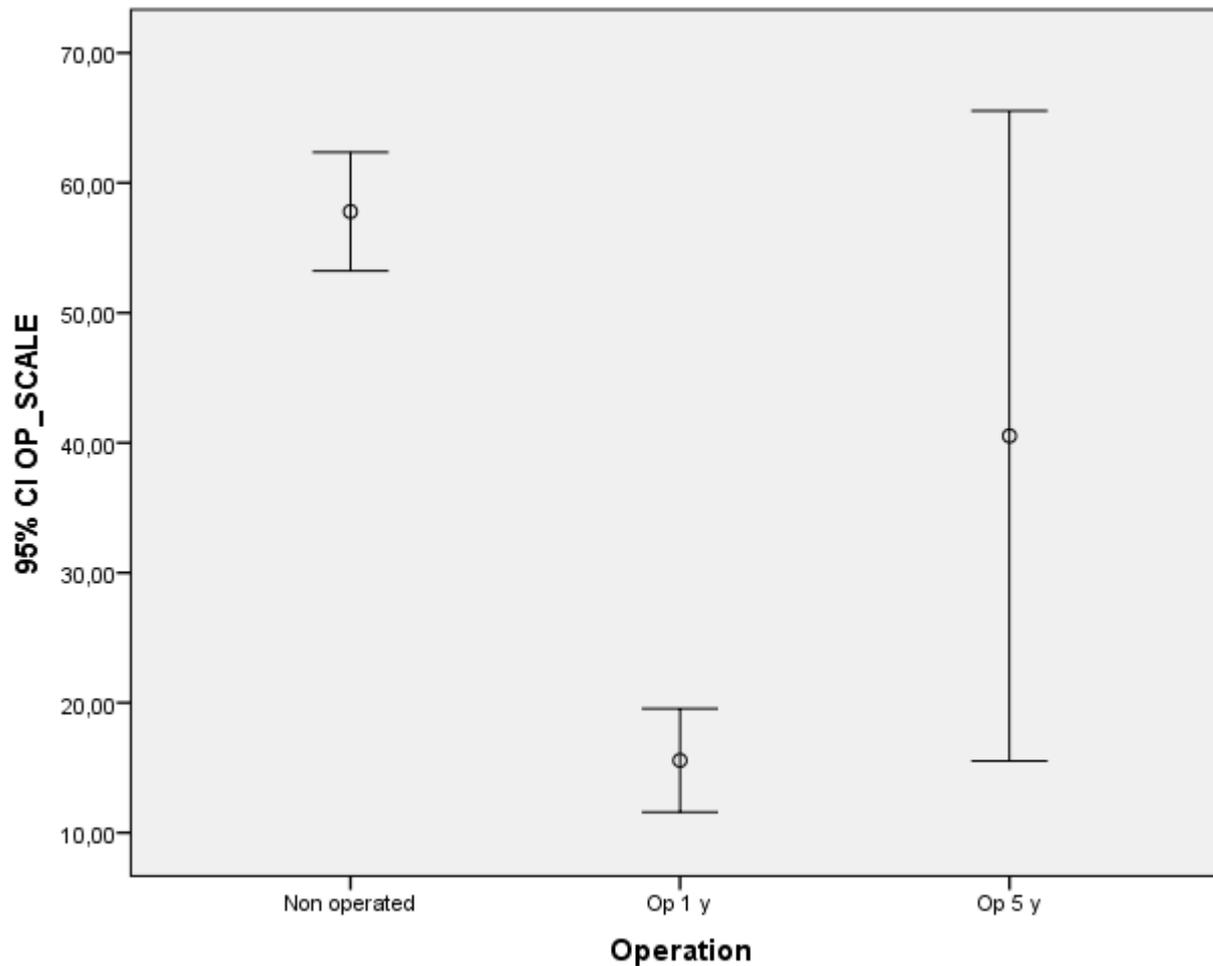
PROS: Pre, post (1 og 5 år)



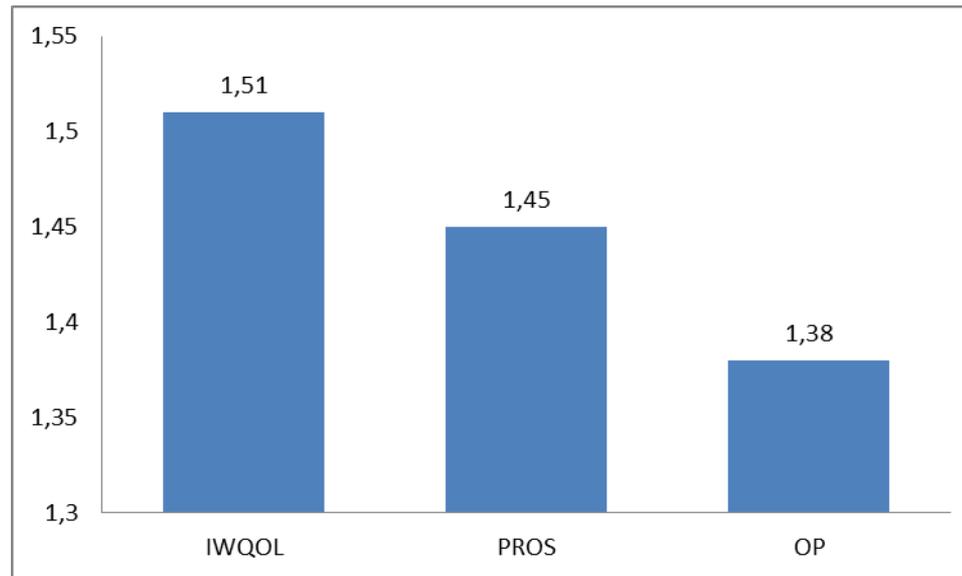
IWQOL: Pre, post (1 og 5 år)



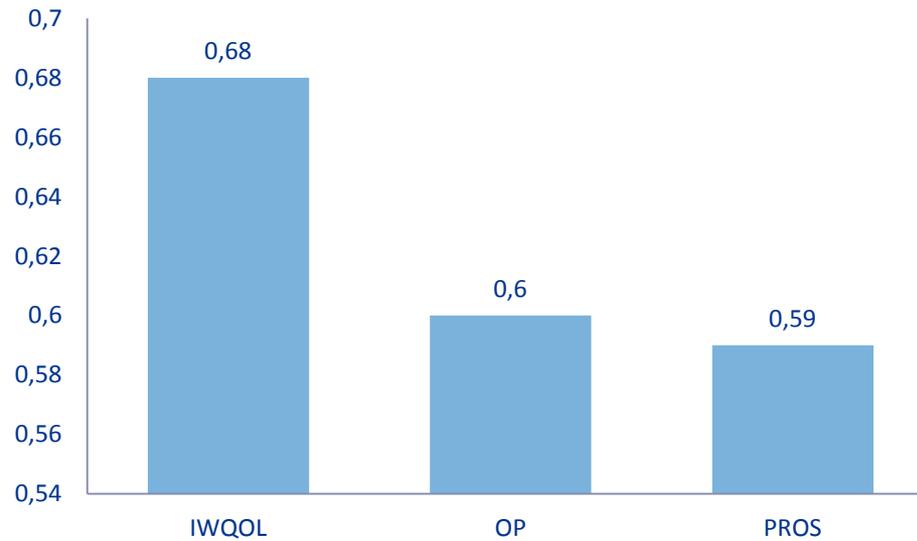
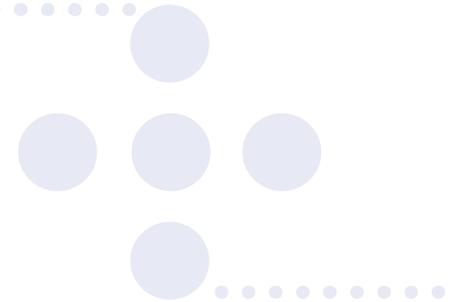
OP-scale: Pre, post (1 og 5 år)



ES: Pre versus post (1 år)

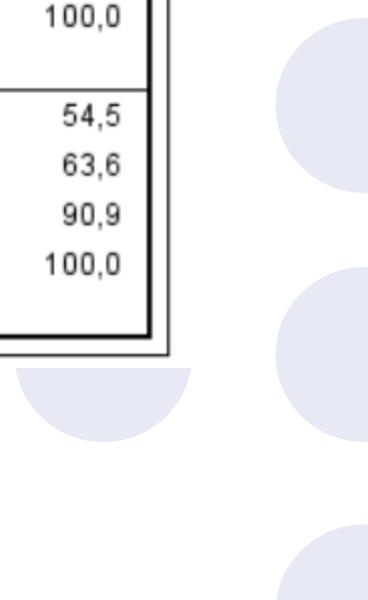


Korrelasjonar: KMI - QOL



PROS_sexual

Operation			Frequency	Percent	Valid Percent	Cumulative Percent
Non operated	Valid	Not bothered	29	26,6	26,6	26,6
		Mildly bothered	22	20,2	20,2	46,8
		Moderately bothered	36	33,0	33,0	79,8
		Considerably bothered	22	20,2	20,2	100,0
		Total	109	100,0	100,0	
Op 1 y	Valid	Not bothered	58	69,0	69,0	69,0
		Mildly bothered	17	20,2	20,2	89,3
		Moderately bothered	6	7,1	7,1	96,4
		Considerably bothered	3	3,6	3,6	100,0
		Total	84	100,0	100,0	
Op 5 y	Valid	Not bothered	6	54,5	54,5	54,5
		Mildly bothered	1	9,1	9,1	63,6
		Moderately bothered	3	27,3	27,3	90,9
		Considerably bothered	1	9,1	9,1	100,0
		Total	11	100,0	100,0	



PROS- items

Domene			
Fysisk funksjon	0	1-2	3
Smerter	0	1-2	3
Diskriminering	0	1-2	3
Søvn	0	1-2	3
Seksualliv	0	1-2	3
Sosial omgang	0	1-2	3
Daglege gjeremål	0	1-2	3
Sjølvkjensle	0	1-2	3

PROS-sum

Sumskåren brukast som ein indikator for kor plaga pasienten er. Merk at det er viktig å ikkje bruke sumskåren aleine i klinisk arbeid sidan ein pasient kan ha låg sumskår men ha betydelege plager på enkeltområder.

PROS-sumskår er basert på at alle items er vekta likt. Slik treng det ikkje nødvendigvis vere på individnivå. I kva grad ein pasient føler seg «plaga» samla sett kan derfor avvike frå inndelinga nedanfor. Spør derfor gjerne også i kva grad pasienten føler seg plaga samla sett frå «ikkje plaga» til «betydeleg plaga».

Skår	Vurdering
<0,5	Ingen (eller svært milde plager)
0,5-1,49	Milde plager
1,5-2,49	Moderate plager
≥ 2,5	Betydelege plager

Bruk PROS i klinikken – heilt fritt!



Navngivelse-IkkeKommersiell-DeIPåSammeVilkår
CC BY-NC-SA

<https://goo.gl/wbnWa1>



Førde sentralsjukehus

- Er du plaget med bivirkninger relatert til at du har gjennomgått fedmekirurgi?

Betydelig plaget	Moderat plaget	Mildt plaget	Ikke plaget
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

- Hvor fornøyd er du, alt tatt i betraktning, med behandlingsresultatet etter fedmekirurgi?

Svært fornøyd	Fornøyd	Usikker	Misfornøyd
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Skjema	Skala	Samlet fornøydhet med opr	Bivirkninger	Totalt fornøyd	Helsa for tiden
Power of food scale	PFS Food availability, mean	,293**	-0,051	,330**	,251**
	PFS Food present, mean	,289**	-0,044	,302**	,291**
	PFS Food tasted, mean	0,129	-0,056	0,137	0,142
	PFS Total score, mean	,278**	-0,058	,300**	,268**
GSRS	Diarrhea 0-100	,333**	,316**	,279**	,303**
	Indigestion 0-100	,399**	,330**	,331**	,321**
	Constipation 0-100	,326**	,363**	,250**	,306**
	Abdominal pain 0-100	,530**	,521**	,352**	,502**
	Reflux 0-100	,261**	,174*	,262**	,192*
GERDQ	GERDQ sum 0-18	-0,058	-0,320**	-0,026	-0,064
FTQ	Overall satisfaction with food 1-5	,435**	,353**	,546**	,417**
	Overall food tolerance 0-16	0,079	,288**	0,067	0,074
IWQOL-lite	IW Physical 0-100	-0,611**	-0,125	-0,425**	-0,514**
	IW Self esteem 0-100	-0,610**	-,141*	-0,515**	-0,398**
	IW Sexual life 0-100	-0,638**	-,182*	-0,399**	-0,332**
	IW Work 0-100	-0,635**	-0,113	-0,431**	-0,408**
	IW Total 0-100	-0,748**	-,167*	-0,555**	-0,499**
	IW Public distress 0-100	-0,526**	-0,102	-0,439**	-0,275**
SF-36 v. 1	SF36 Physical functioning score	-0,464**	-0,261**	-0,360**	-0,545**
	SF36 Role-physical score	-0,469**	-0,383**	-0,347**	-0,614**
	SF36 Bodily pain score	-0,519**	-0,458**	-0,389**	-0,641**
	SF36 General health score	-0,606**	-0,432**	-0,458**	-0,751**
	SF36 Vitality score	-0,549**	-0,341**	-0,462**	-0,592**
	SF36 Social functioning score	-0,696**	-0,375**	-0,530**	-0,579**
	SF36 Role-emotional score	-0,549**	-0,323**	-0,438**	-0,538**
	SF36 Mental health score	-0,599**	-0,379**	-0,496**	-0,559**
	PCS	-0,675**	-0,483**	-0,501**	-0,776**
	MCS	-0,689**	-0,427**	-0,542**	-0,664**
HADS	Angst og depr total	,600**	,378**	,387**	,538**
	Depresjon	,564**	,339**	,433**	,534**
	Angst	,512**	,335**	,280**	,439**

Postoperative data. Tor-Ivar Karlsen og Vigdis Dagsland, personleg kommunikasjon. N = 206.



Illustrasjonsfoto: <http://www.norsefeedback.no/om-norse/pasienterfaring/>