



Validation of the Fatigue Severity Scale in Danish patients with systemic lupus erythematosus

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INTRODUCTION

Fatigue is a symptom of systemic lupus erythematosus (SLE), which has a substantial effect on the patients' quality of life and is a parameter that is difficult to quantify. The Fatigue Severity Scale (FSS) is a validated and reliable tool for quantifying fatigue. However, no Danish translation has yet been developed or validated. The aim of this study was to translate the FSS from English into Danish and subsequently to test and describe its validity and reliability in Danish SLE patients.

MATERIAL AND METHODS

The FSS was translated from English into Danish and then back-translated. The translation agreed upon by medical professionals was tested for construct validity in an unselected group of SLE patients. The final version was tested for content validity, internal consistency and test-retest reliability in a second unselected group of SLE patients using the Danish version of the Short-Form Health Survey (SF-36). All patients included were outpatients with SLE of low to moderate disease activity, and low to moderate organ damage.

RESULTS

Correlations were found between the Danish FSS and the main component scores of the SF-36. We found a high Cronbach's alpha as well as acceptable results of the intraclass correlation coefficient and the Bland-Altman plot.

CONCLUSION

The Danish FSS translation is a valid and reliable measure of fatigue in the Danish SLE patients included in this study.

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Responsiveness of a Danish version of the Disabilities of the Arm Shoulder and Hand (DASH) questionnaire

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INTRODUCTION

This prospective cohort study in consecutive shoulder patients sought to determine the minimal, clinically important difference of the Danish version of the Disabilities of the Arm, Shoulder and Hand (DASH) questionnaire and to evaluate patient responsiveness to it.

The study was undertaken at the Outpatient Clinic of the Department of Orthopaedic Surgery, Viborg Regional Hospital, Denmark.

MATERIAL AND METHODS

During clinical examination, patients completed a baseline questionnaire including the DASH questionnaire, the EuroQol-5D index and the EuroQol-VAS. A follow-up questionnaire concerning the patient's global impression of change was posted to the patients eight to nine weeks after the initial assessment. Responsiveness was analysed by correlation analysis and receiver-operating characteristic curve statistics. Using the optimal cut-off point of the receiver-operating characteristic curve, the minimal, clinically important difference was determined.

RESULTS

A total of 81 patients with a variety of shoulder diagnoses were included. Only the DASH questionnaire demonstrated significant differences in change scores ($p = 0.001$). The area under the curve was 0.76 (95% confidence interval: 0.62-0.90), and a minimal clinically important difference of 12 points was found.

CONCLUSION

The DASH questionnaire provides a response outcome measure in Danish-speaking orthopaedic shoulder patients.

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