Thai Version of the Quality-of-Life in Epilepsy Inventory: Comparison Between the QOLIE-31 and the QOLIE-10

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ABSTRACT

Approximately 1% of the general Thai population have epilepsy. Measuring the outcome of epilepsy treatment has traditionally assessed seizure frequency and severity, adverse effects and antiepileptic drug levels. Patients' perceptions often include additional parameters that encompass the effects of epilepsy on daily activities and functions. The health-related quality of life instruments for a population with epilepsy were developed from the questionnaires that were used for evaluating the general population. These instruments include the QOLIE-89 instrument, QOLIE-31 and QOLIE-10. This current report describes a comparison between the QOLIE-31 and the QOLIE-10 to assess the usefulness of the abbreviated questionnaire in Thai.

Key words: Quality-of-life in epilepsy, QOLIE-10, QOLIE-31, Thai version

INTRODUCTION

Epilepsy is a medical diagnosis that is retained even when signs and symptoms are well controlled and all laboratory tests are normal. Jacoby (1992) described epilepsy as "both a medical diagnosis and a social label". The possibility of recurrent seizures is a silent but ever-present component of daily life for the patients who carry the diagnosis of epilepsy. They may experience the effects of their drugs and/or their illness on their work, driving, social activities and their general activities in daily life.

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The health-related quality of life instruments for a population with epilepsy were developed from the questionnaires that were used for evaluating the general population. These instruments include the QOLIE-89 instrument, QOLIE-31 and QOLIE-10 (Cramer et al., 1996, 2000). This current report will describe a comparison between the QOLIE-31 and QOLIE-10 to assess the usefulness of the abbreviated questionnaire in Thai.

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