Validity of the Patient Generated Index as a Quality-of-Life Measure in Radiation Oncology

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Purpose/Objectives: To evaluate psychometric properties of an instrument designed to measure individualized health-related quality of life (HRQOL).

Design: Repeated measures of self-reported quality of life.

Setting: An outpatient radiation therapy department in the western part of the United States.

Sample: 86 adults with cancer receiving their first course of radiation therapy.

Methods: The Patient Generated Index (PGI), the National Comprehensive Cancer Network’s Distress Thermometer (DT), and the European Organisation for Research and Treatment of Cancer Quality-of-Life Questionnaire—Core-30 (QLQ-C30).

Main Research Variables: Convergent validity, responsiveness, sensitivity, and response shift.

Findings: PGI scores were inversely correlated with scores on the DT (r = –0.49, –0.55, –0.44; p < 0.001), as well as the role (r = 0.31, 0.4, 0.38; p < 0.01), emotional (r = 0.33, 0.41, 0.33; p < 0.01), social functioning (r = 0.27, 0.49, 0.42; p < 0.05), pain (r = –0.29, –0.39, –0.39; p < 0.01), and fatigue (r = –0.35, –0.25, –0.47; p < 0.05) QLQ-C30 subscales at all measurement times. The PGI was responsive to those reporting high or low DT scores (t = 4.42, 3.32, 2.9; p < 0.05). A small-to-moderate effect size was detected in those who had an increase (effect size = 0.51) or decrease (effect size = 0.38) in HRQOL over time. Participants reconceptualized HRQOL over time.

Conclusions: Data supported the PGI as a valid measure of individualized HRQOL.

Implications for Nursing: The PGI potentially provides a more patient-centered measure of HRQOL in patients with cancer. Additional testing is needed in larger, more diverse groups.

Literature Review

Patient-centered care is a primary component of quality health care (Institute of Medicine, 2001), a fact supported in a report from the Picker Institute (2004).