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PSYCHOMETRIC EVALUATION OF AN INDIVIDUALISED MEASURE OF MEN'S PERCEIVED IMPACT OF AGE-RELATED DECLINE IN HORMONE LEVELS ON THEIR QUALITY OF LIFE (QOL): THE A-RHDQOL

C.V.MCMILLAN¹, M.GIANNOULIS², F.C.MARTIN², P.H.SÖNKSEN², C.BRADLEY¹.

¹Royal Holloway, University of London; ²GKT Medical School, St Thomas' Campus.

ABSTRACT

Introduction

This study evaluated the psychometric properties of a new individualised questionnaire, the A-RHDQoL, measuring perceived impact of age-related hormone decline in QoL of older men. Respondents rate personally applicable life domains for impact of their hormonal decline and importance to their QoL. A-RHDQoL design was based on the HDQoL for people with growth hormone (GH) deficiency and ADDQoL (for diabetes).

Methods

Healthy older men (age range: 64-80 yrs; N=128), being screened for a trial of GH and testosterone (T) replacement, completed the A-RHDQoL. Negative A-RHDQoL domain scores indicate the domain is reported as negatively impacted by age-related hormonal decline. Larger scores (positive or negative) indicate more impact and more importance for QoL. A single overview item measured present QoL. IGF-1 and total T levels were measured.

Results

Of the 24 A-RHDQoL domains, 21 were rated as relevant and important. Domains reported as most severely (and negatively) impacted by age-related hormone decline were [mean weighted impact (sd)]: memory [-4.54 (3.02)], energy [-4.44 (2.49)] and physical stamina [-4.29 (2.41)], (maximum range -9 to +9). The 21 domains had high internal consistency reliability (Cronbach's alpha coefficient =0.92) and could be summed into an overall Average Weighted Impact score. 'Present QoL' showed a small correlation with total T levels [$r=0.26$, $p<0.01$, $N=114$]. There were no other significant correlations (following Bonferroni corrections) between QoL scores and hormone levels.

Conclusions

The A-RHDQoL is a new measure of perceived impact of age-related hormonal decline on QoL. Although at an early stage of development internal consistency reliability is established for older men.