

# Chronic Hepatitis C and Health-Related Quality of Life in Patients with Cognitive Impairment

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## Keywords

Quality of life · Chronic hepatitis C · Cognitive impairment · Caregivers

**Hepatite C crônica e qualidade de vida relacionada à saúde em pacientes com comprometimento cognitivo**

## Palavras Chave

Qualidade de vida · Hepatite C crônica · Comprometimento cognitivo · Cuidadores

Dear Editor,

We have read the article by Rei et al. [1] about health-related quality of life valuation in patients with hepatitis C virus (HCV) infection. While we agree that it contributes to the subject knowledge, we think the selection of patients should be further discussed.

The authors state that the presence of low cognitive level is part of the exclusion criteria. We understand that this criterion is important as it relates to the capacity of patients to answer and value their own health

states; however, this leads to a lower representativeness of the study population within the whole population with HCV, especially when considering that cognitive alteration is a usual complication of chronic HCV infection [2]. Therefore, we believe that this population should not be excluded as it is important to consider their health-related quality of life as necessary information for their care and also for developing cost-utility studies.

We propose that the authors could interview caregivers of these patients as a viable alternative. For example, Kahle-Wroblewski et al. [3] have considered the caregiver (person who knows and has contact with the patient at least 10 h per week) as a good source to valuation of the quality of life in patients with Alzheimer disease or dementia. Sneeuw et al. [4] did a review of 23 studies on health-related quality of life published between 1991 and 2000 and concluded that the coincidence between patient and proxy was moderate to high and the difference of quality of life reported was modest (median of 0.2).

We also recommended another option, which would be to develop an instrument for patients with chronic diseases, like HVC infection, and cognitive impairment,

like the San Martin scale. This instrument is a multidimensional scale to measure quality of life in patients with significant intellectual disabilities through an informant (person who has known the patient and his disease for at least 3 months and has had the opportunity to watch it for extended periods of time) [5].

In conclusion, we suggest that in the case of patients with cognitive impairment, researchers should inter-

view the caregiver because this person is a reliable source of information in patients with chronic disease such as HCV infection.

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### Disclosure Statement

The authors have no conflicts of interest to declare.

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