review of published peer-reviewed studies. METHODS: A literature search was performed using search terms “quality of life,” “neuromotoricis optica,” and “Devic’s.” The search was limited to English language. All studies that got published before November 2014 were reviewed. Studies that included patients with NMO and reported use of validated QoL instrument were considered eligible for quality analysis. Independent researchers were involved in study selection and data extraction. RESULTS: A total of seven studies met the inclusion criteria. All the studies were conducted in different countries: The United states of America, United Kingdom, France, Japan, and Argentina. The number of patients included in the studies ranged from 18-50. The common QoL instruments used included: Short-Form 36 and different pain severity scores. Three studies used MS patients as the comparator while two compared the data with normal subjects. Most studies reported that QoL was lower in patients as compared to normal subjects. The lower QoL score corresponded with higher pain scores in NMO patients as compared to MS patients. CONCLUSIONS: Our review showed that NMO patients have worse QoL compared to normal subjects. Future studies should explore psychometric properties in NMO patients with cystic fibrosis (CF) is a life-limiting, genetic disorder that has a tremendous impact on patients’ quality of life (QoL). The goal of this study is to summarize QoL literature in CF and identify instruments utilized to capture QoL data in adult patients. METHODS: A comprehensive literature search using PRISMA guideline was conducted from January 2010 to October 2014 using electronic databases such as PubMed, Scopus, Cochrane Database, PsychInfo, and Google Scholar. The search terms psychological, social, and spiritual impact on patients with CF were identified. The QoL instruments from the studies were identified and a review of their psychometric properties was conducted. The search strategy was limited to studies conducted in adult population. Full-text, published articles in the United States and Europe were included in the final review. RESULTS: A total of 14 QoL studies in CF which utilized 6 validated instruments were identified. Three instruments were disease-specific (CFQ-R, CF-QoL, and a single item measure) and the remaining three were generic instruments (SF-36, EQ-5D, and UK-SIP). CFQ-R was used in 11 studies, whereas 3 studies used the CF-QoL. Some important factors that influenced QoL in CF patients are associated with having a self-esteem, and ethnicity. Psychometric validation included validity (discriminant, convergent, and concurrent validity) and reliability testing. Reliability of the instruments was found to be within appropriate ranges (CFQ-R: Cronbach’s α = 0.70; CF-QOL: Test-Retest > 0.8; and Generic instruments: α = 0.68-0.8). CONCLUSIONS: Clinical outcomes, patient perception, and demographic variables were found to influence QoL in adult CF patients. CFQ-R is the most commonly reported QoL instrument in CF. Also, the time constraint patients face in using QoL assessment in clinical practice can be addressed by the recently developed single-item, CF-specific QoL questionnaire. Overall, CF has a negative impact on the physical, mental, and social aspects of patient’s life.