OBJECTIVES: To compare socio-demographic, reproductive and prenatal attention conditions among women who perform work outside the home (as opposed to housework); in the case of those going out to work, to describe the conditions of such work; and finally to show whether health-related differences exist that correlate with working situation (at home vs. outside the home). METHODS: Transversal study (pilot) carried out in a family medicine unit of the Mexican Social Security Institute (IMSS) between April and July 2003, during which period interviews were effected with 537 pregnant women engaged in either paid work, housework, or both, and registered with the Family Medicine external consultation services. A questionnaire was applied in order to establish demographic and reproductive characteristics, as well as variables related with prenatal control applied in order to establish demographic and reproductive risks for health.

The sample consisted of 127 females or more than three children and who remain at the home.

The presence of genitourinary symptoms is greater for those who work outside the home (as opposed to housework); and finally to show whether health-related differences exist that correlate with working situation (at home vs. outside the home).

METHODS: Transversal study (pilot) carried out in a family medicine unit of the Mexican Social Security Institute (IMSS) between April and July 2003, during which period interviews were effected with 537 pregnant women engaged in either paid work, housework, or both, and registered with the Family Medicine external consultation services. A questionnaire was applied in order to establish demographic and reproductive characteristics, as well as variables related with prenatal control and the existence of symptoms before and after pregnancy; finally, to provide information on characteristics of both domestic and extra-domestic work. RESULTS: In total, 36.5% were women with paid work (A), the rest having exclusively domestic work (63.5%) (B). Of those with extra-domestic work (A), 78.6% had clerical or similar jobs, mainly in service activities (45%), and 18.9% were industrial workers. Stress at work is present in 74% of cases interviewed. On analyzing the effect of work on women's health conditions, it was observed that women who do not go out to work show a higher risk of musculoskeletal alterations than those who do so (RM: 4.3 I95%: 1.6–11.4). The presence of genitourinary symptoms is greater for those who claim to have had more than three children and who remain at home.

CONCLUSIONS: The monitoring of domestic work is important in view of the need for attention to the conditions in which such work is carried out; it also helps identify potential risks for health.

QUALITY OF LIFE AND HEALTH BEHAVIORs OF VENEZUELAN PHARMACY STUDENTS

Bastardo YM
Central University of Venezuela, Caracas, DC, Venezuela

OBJECTIVES: The purpose of this study was to describe health-related quality of life (HRQL) of Venezuelan pharmacy students and to explore the association among quality of life, health behaviors, and demographics. METHODS: A random sample of 171 of pharmacy students, ranging in age from 18 to 35 years were surveyed using a written questionnaire. HRQL was determined using the Medical Outcome Study Short Form 36 (MOS SF-36). The associations among HRQL, demographics, and health behaviors were examined using both bivariate and multivariate models. RESULTS: The sample consisted of 127 females and 44 males. The sample had a mean age of 22.3 years. As expected the sample was healthy; only 11 subjects (6.4%) evaluated their health as poor and 30 subjects (17.5%) reported to suffer from an illness. Forty subjects (23.4%) reported current medication use. The prevalence of alcohol consumption during the previous month was 65.8% and for smoking it was 15.5%. One third of the sample reported no exercising during the previous month. Multiple regression analyses were used to model HRQL score as a function of age, sex, income, illness, lack of regular exercise, alcohol consumption, and smoking. The regression model explained approximately 20% of the variance in HRQL. Controlling for other variables in the model, low income, illness, and smoking had a significant negative impact on HRQL. Lack of regular exercise and age were not associated with HRQL. Controlling for other variables male students had significantly higher scores in HRQL than female students. Alcohol consumption was associated with HRQL in bivariate but not in multivariate models. CONCLUSIONS: The overall quality of life of pharmacy students in Venezuela is good. This exploratory study demonstrates sex differences in perceived quality of life of college students. Quality of life is associated to certain predictors of future health status, including health behaviors such as smoking.

ASSESSING THE PSYCHOMETRIC PROPERTIES OF THE PSYCHOSOCIAL SUBSCALE OF THE MENOPAUSE-SPECIFIC QUALIPAUSE INVENTORY (QPI) WITH ITEM RESPONSE THEORY

Kuessner D¹, Zoellner YE²
¹University of Magdeburg, Magdeburg, Germany; ²Solvay Pharmaceuticals GmbH, Hannover, Germany

OBJECTIVES: To analyse the 8-item, 5-level psychosocial subscale of the QualiPause Inventory (QPI)—a recently developed, condition-specific health-related quality of life (HRQoL) instrument for peri- and post-menopausal women—with item response theory (IRT). METHODS: Data: postal survey of 785 women aged 45–65 years, identified from Sheffield general practice lists. Techniques: “Kernel-smoothing-technique” (KST)—in order to investigate the item-response and test-information curves—followed by the estimation of Muraki’s general partial credit model (GPCM). Software: Testgraph and Parscale, respectively.

RESULTS: The non-parametric KST showed that the scale provides most information for above-average psychosocial distress, with a peak for subjects with a trait of approximately 1.5 standard deviations (SDs) above the sample average. Review of category response curves suggests that, in order to optimize model fit, for items 2–5 and 8, response categories 2 (hardly bothered) and 3 (moderately bothered) could be collapsed; for items 1, 6, and 7, categories 2 to 4 (considerably bothered) could be collapsed. The GPCM yielded step parameters lying in the range of −0.818 and 2.082 with respect to the standard normal distribution and therefore covers the medium-to-severe trait spectrum. Item 2 (feeling tense) has got the highest slope parameter (2.1), and item 1 (difficulty sleeping) has got the lowest (0.573). Overall, items 2–5 contribute most information.

CONCLUSIONS: The psychosocial subscale of the QPI is particularly valuable to assess HRQoL of peri- and post-menopausal women with moderate to severe symptoms of emotional distress. The results may be used for further developing of the QPI. In particular, items 1 and 8 may be candidates for deletion as they add little extra information. This type of analysis facilitates the interpretation of patient-reported outcomes and may, therefore, lead to a higher acceptance of such instruments by decision-makers.

ASSESSING THE EXTERNAL VALIDITY OF DROTRECOGIN ALFA (ACTIVATED) CLINICAL TRIALS IN AN OBSERVATIONAL STUDY USING PROPENSITY SCORE MATCHING TO REDUCE RECRUITMENT BIAS

Riou França L¹, Payet S¹, Le Lay K¹, Vallet B², Dhaïnaut JF³, Launois R⁴
¹REES France, Paris, France; ²Huriez Hospital, University Hospital of Lille, Lille, France; ³Paris V University, Paris, France