OBJECTIVE: To evaluate the basic knowledge level of DM

RESULTS: were applied.

DM taken part in the process of evaluation inclusions of drugs

on the basic formulary. Descriptive and multivariate analysis test

questionnaire about utilization of concepts of PE/HE in local

the concepts of PE/HE.

CONCLUSIONS: strengthened the knowledge and utilization of the PE/HE tools in

strengthened QoL mean scores from EuroQoL and AQoL questionnaires

presentation we propose a relatively simple approach for comparing

groups are obtained using different instruments, comparing

summary statistics formally is difficult and there is nothing
described in the methodology or applied literature. In this

we propose a relatively simple approach for comparing

QoL mean scores from EuroQoL and AQoL questionnaires

indirectly when this situation is encountered, which leads to a
result equivalent to that of a t-test. METHODS: Using an
example from a utility study for illustration, we describe a
method based on multiple imputation (MI), an approach
commonly used to deal with missing data. From an estimate of
the correlation between the total mean scores, we describe how
simple linear regression can be used to obtain imputed values of
EuroQoL scores from AQoL scores. The multiple imputation
approach then offers simple techniques to obtain pooled esti-

mated of mean difference and variance on the EuroQoL scale.

RESULTS: We show how the resulting data can be used in a
simple way to generate a valid t-test statistic on the same QoL
scale. We then briefly discuss the strengths and weaknesses of
this approach from the point of view of QoL measures as well
as methodology. CONCLUSIONS: The approach we present
can be used to compare data from different QoL instruments. We
summarise the circumstances under which such comparisons
would be valid, and also highlight situations when this approach
should not be used.

OBJECTIVES: To describe the development and validation of a
Dutch version of the London Handicap Scale (DLHS). This
questionnaire was based on the London Handicap Scale, a valid
and reliable utility instrument for measuring social participation
in adults.

METHODS: The DLHS was tested in 803 adults with a
questionnaire consisting of the DLHS itself, the Impact on
Participation and Autonomy questionnaire (IPA), the Dutch version
of the EuroQol EQ-5D and questions concerning e.g. chronic
diseases, use of medical devices. The study population consisted
of patients with rheumatoid arthritis, car/cystic fibrosis, epilepsy,
larynchnetomies and multiple sclerosis.

RESULTS: Content validation, evaluated by relating the scores on the dimensions of
the DLHS and the number of chronic diseases was satisfactory. Conceptual validation
was shown by large (or some moderate, almost large) correlations of predefined pairs of the DLHS
dimensions with domains of the IPA. Correlations between the DLHS sumscore and the IPA
subscales were considerably larger than corresponding correlations between the EQ-5D and the IPA
subscales, indicating a good concurrent validity of the DLHS.

CONCLUSIONS: Based on this evaluation the questionnaire seems feasible and valid for assessing differences between different
subgroups of chronically ill persons five criteria was shown by correlating the DLHS sumscore with five predefined criteria.

SUMMARY: The approach we present can

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