RELIABILITY, AND VALIDITY OF THE FATIGUE SYMPTOM INVENTORY
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OBJECTIVES: The aim of this study was to determine the reliability and validity of the Fatigue Symptom Inventory (FSI) for the Turkish population. METHODS: The research was conducted in the university students. The study sample included 200 students (56% women, 44% men). Data were collected with a sociodemographic form, FSI, SF-36. The original instrument was translated and back translated by two independent translators. For psychometric measures, a small sample was used to check the initial comprehension and feasibility. Cronbach’s Alfa was used for concurrent validity. The SF 36 were used for concurrent validity. Cronbach’s Alfa was used for internal consistency and feasibility. Cronbach’s Alfa was used for psychometric measures, a small sample was used to check the initial comprehension and feasibility. Cronbach’s Alfa was used for concurrent validity. The SF 36 were used for concurrent validity. RESULTS: The internal consistency coefficient (Cronbach’s alpha) of FSI was 0.91. Factor analysis of the scale revealed that it was composed of 3 factors with Eigenvalues >1.0, accounting for 65.4% of the total variance. All items of the Turkish FSI had a factor loading ranging from 0.651–0.759. CONCLUSIONS: The research suggests that the validity and reliability of the Turkish FSI are satisfactory, and that it can be used in Turkey.

THE ASSOCIATION OF BODY MASS INDEX ON HEALTH RELATED QUALITY OF LIFE IN THE GENERAL ADULT POPULATION IN ENGLAND
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OBJECTIVES: The link between obesity or being overweight with life-threatening illnesses is well established. Furthermore, health-related quality of life (HRQoL) is reduced when body mass index (BMI) is elevated, but there are limited data on the effects of BMI on HRQoL in the general population or the aspects of HRQoL that are most affected. The objective of this study was to investigate the relationship between BMI and HRQoL, and any differences between men and women using data from the 2003 Health Survey of England. METHODS: HRQoL (derived from EQ-5D responses) data from the 2003 Health Survey of England was used. Responses from 14,836 individuals were utilised, and univariate regression and linear regression analyses, controlling for confounding factors such as obesity related co-morbidities, were conducted to examine the relationship between BMI and HRQoL. RESULTS: A significant association between BMI and HRQoL was found after controlling for gender, age, age when left school, manual work, and five obesity-related morbidities. The maximum HRQoL was reached at a BMI of 26.0 in men and at a BMI of 24.4 in females, which means that BMI is negatively associated with HRQoL for both overweight and obese individuals. At higher BMI values, men reported higher HRQoL than women, suggesting that obesity and being overweight has a greater impact on HRQoL for females than for males. At lower BMI values, HRQoL was lower in men than women. In women, all five dimensions of the EQ-5D (mobility, self-care, usual activity, pain and anxiety) worsened with obesity—in men, all but anxiety were worsened. CONCLUSIONS: There is a significant association between BMI and HRQoL in males and females in the general population. Nearly all aspects of HRQoL are adversely affected by elevated BMI. The optimum HRQoL is achieved with a BMI of approximately 23 for both males and females.

WEIGHT-RELATED MORBIDITY AND FAMILY DISRUPTION FOLLOWING PEDIATRIC EMERGENCY DEPARTMENT TREATMENT (PED) OF ACUTE MINOR INJURY
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OBJECTIVES: Obesity is a growing problem for children, yet little is known about the impact of weight on acute injury. Determine relationships between weight and morbidity/family disruption for children treated and discharged home from PED for minor injuries (soft tissue injuries, lacerations, sprains, strains, and minor head injury). DESIGN/METHODS: Prospective pilot study of children treated and discharged to home. Families completed questionnaire and interview in PED and at 1-week telephone follow-up. Patients divided into two groups: 1) healthy weight (HW; BMI > 5th < 85th percentile), or 2) overweight (O2; BMI ≥ 85th < 95th percentile) combined with obese (Ob; BMI ≥ 95th percentile). RESULTS: Thirty-five families completed follow-up. Mean patient age = 8.33 years; weight ranged from 28.6 – 207.5 pounds (M = 86.9, SD = 53.0). Consistent with previous reports, O/Ob children accounted for 4 of 5 fractures. At baseline, increased weight was significantly correlated with parent reports of decreased HRQoL (Pediatric Quality of Life Inventory) across all domains: Total (r = 0.553, p = 0.001), Physical Summary (r = -0.473, p < 0.005) Psychosocial Summary (r = -0.541, p = 0.001), Social (r = -0.481, p < 0.005), and School (r = -0.554, p < 0.005), with the exception of Emotional. Increased weight was significantly correlated with increased number of post-injury days identified by parents as abnormal (r = 0.433, p < 0.005). ED physicians were more likely (phi = 0.655) to recommend a follow-up visit for patients identified as O/Ob than HW, despite similar injury type and body part affected. However, parents of O/Ob children were more likely (phi = 0.454) to report that their family was “back to normal” at 1-week follow-up. CONCLUSIONS: Increased weight was correlated with decreased QOL at baseline, and greater morbidity and family disruption for pediatric patients with acute injuries treated in the ED. Future research is needed to further explore these findings.

EFFICACY OF TREATMENT AND PATIENT SATISFACTION IN TREATMENT OF CLIMACTERIC DISORDERS WITH SOY ISOFlavONES: FRENCH APPROACH
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OBJECTIVES: In France, some 10 million women are undergoing the menopause, while 300,000 to 500,000 become menopausal every year. Climacteric disorders, of variable intensity and frequency, can be found in more than 50% of them. Upon occurrence of the menopause, 30 to 50% of women also complain of non-specific disorders (sleep difficulties or mood swings, symptoms of depression, etc.), which are the same as hot flushes, can be highly debilitating and alter the quality of life of the patient and those around her, in her private and professional life. The authors have assessed patient satisfaction with regard to treatment of these disorders with 2 daily capsules of Soy+Mag, or one daily 37.5 mg dose of soy isoflavones in the form of aglycone. METHODS: 78 menopausal patients complaining spontaneously of hot flushes during a medical consultation were included in this pragmatic study, carried out under real-life conditions. The study protocol consisted of assessing changes in patients’