Measuring Health-Related Quality of Life Outcomes of East-West Medicine

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We can monitor health by taking patient’s

- Temperature
- Respiration
- Pulse
- Weight
- Blood pressure
And by receiving (listening) what patient says

What he or she is able to do
How she/he feels about life
Health-related quality of life

What the person can DO (functioning)

• Self-care
• Role
• Social

How they FEEL (well-being)

• Emotional well-being
• Symptoms (pain, energy/fatigue)
HRQOL improvement is what patients expect from therapy

Holistic approach, wide availability of therapies, self-help advice, and …

Symptom relief and improved quality of life

(Richardson, AJPH, 2004, complimentary medicine, British National Health Service)
SF-36 physical health domains
(Mean = 50, SD = 10)

Physical Health

- Physical function
  10 items
- Role function-physical
  4 items
- Pain
  2 items
- General Health
  5 items
SF-36 mental health domains
(Mean = 50, SD = 10)

Mental Health

- Emotional Well-Being
  5 items

- Role function-emotional
  3 items

- Energy
  4 items

- Social function
  2 items
SF-36 completed by 54 patients receiving care at UCLA CEWM

✓ Baseline

✓ End of therapy (about 6 weeks later)

Average age = 56

84% white; 58% female
Baseline mental and physical health for 54 patients at UCLA CEWM

- Mental
- Physical

- East-West
- MS
- ESRD
- Diabetes
- Depression
- Prostate disease
- GERD
- Epilepsy
- General Pop
- AIDS
- Symptomatic
- Asymptomatic
Change in SF-36 scores in 6 weeks

Baseline vs. Followup

Effect Size

PF10  Role-P  Pain  Gen H  Energy  Social  Role-E  EWB  PCS  MCS
0.13  0.35  0.35  0.21  0.53  0.36  0.11  0.41  0.24  0.30
Improvement in physical health for other interventions

Impact on SF-36 PCS

Treatment Outcomes

- Ulcer medicine
- Shoulder Surgery
- Asthma medicine
- Coronary Revascularization
- Heart Value Replacement
- Total Hip Replacement
HRQOL future at CEWM

Ongoing monitoring of care using SF-36 and other HRQOL instruments

Evaluation of cost-effectiveness of care

Cost ↓

Effectiveness ↑
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