



**Service Priorities and Programmes**  
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**Health-related quality of life (HRQoL) in stroke patients in a local tertiary hospital**

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**Introduction**

Stroke is a common, chronic disabling illness. HRQoL is as important as other traditional outcome measures like mortality or dependency. In mild stroke, the impact of illness can affect multiple health dimensions. Such changes in health status may not be captured by traditional assessment tools like the Barthel Index (BI). Quality-adjusted life year is being used for cost-utility analysis and helps decisions on resource allocation. SF-36 is a popular generic HRQoL measure. Local data on changes in HRQoL after stroke are scarce.

**Objectives**

To study the quality of life of stroke patients in a local tertiary hospital.

**Methodology**

Stroke patients admitted to the Queen Elizabeth Hospital were recruited from March to May 2012. They must be Cantonese-speaking Chinese, 18 years of age or older, provide written informed consent, and verbally and cognitively competent in answering the SF-36 questionnaire. The Chinese (Hong Kong) SF-36 Version 1 was administered at baseline, two months and six months after stroke. It measured eight domains of perceived health.

**Result**

162 patients were recruited with mean age 66.5 +/- 14.5, 65% male, no symptom to moderate stroke (NIHSS 3.9 +/- 3.5), no to moderate disability (mRS 2.5 +/- 1.5), and independence in activities of daily living (BI 80.6 +/- 19.4). Two patients were withdrawn from the study soon during the administration of baseline SF-36 questionnaire. At two months, seven patients had died, five were withdrawn from the study and 25 were lost to follow-up, leaving 123 subjects (76%) who responded to the SF-36 interview; of these, 24 were made through proxies. At six months, 109 subjects (67%) responded to the questionnaire. Differences between baseline and 2-month

mean SF-36 scale scores as well as those between baseline and six months were analyzed by paired sample t-test. At two months, Physical Functioning, Role-Physical, Bodily Pain, General Health and Mental Health domains showed significant improvement (PF 57.6 to 69.1%, BP 68.8 to 84.3% [ $P < 0.001$ ] and RP 39.3 to 53.7%, GH 48.1 to 53.7%, MH 65.5 to 69.9% [ $p < 0.05$ ]). At six months, only PF, RP and BP domains remained significantly improved (PF 58.3 to 69.9%, BP 69.4 to 91.7% [ $P < 0.001$ ] and RP 39.4 to 52.1% [ $p < 0.05$ ]). In conclusion, significant improvement in the physical and pain domains of the SF-36 was observed six months after stroke. Further studies will be performed to identify changes in HRQoL among these patients at 1 year and the determinants of these changes. Such data will be useful for improving service delivery and resource allocation.