

Trajectories of Health-related Quality of Life after rehabilitation: results from the longitudinal cohort study ReSpAct

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Abstract

PURPOSE: To identify trajectories of health-related quality of life (HR-QoL) among people with physical disabilities or chronic diseases after rehabilitation, and to determine which factors are associated with trajectory membership.

METHOD: Patients(N=1719) with physical disabilities or chronic diseases were followed at baseline(T0: 3-6 weeks before discharge) and 14(T1), 33(T2) and 52(T3) weeks after discharge from rehabilitation in the longitudinal cohort study Rehabilitation, Sports and Active lifestyle (ReSpAct). Latent class growth mixture modelling was used to determine trajectories of HR-QoL, a data-driven approach, based on self-reported data of the RAND-12. Descriptive statistics were used to determine personal and lifestyle related factors associated with trajectory membership.

RESULTS: Four trajectories of HR-QoL were identified, whereof two small and dynamic trajectories ('fluctuating'(N=25) and 'recovery'(N=13)). Two large and stable trajectories were distinguished and used for further analysis: 'high HR-QoL' (N=489) and 'low HR-QoL' (N=656). Patients with 'high HR-QoL' reported higher levels of physical activity than patients with 'low HR-QoL' on each measurement occasion (1617±1305 versus 1121±1170 minutes/week on T3). Patients with 'high HR-QoL' were more often male (56.0% versus 44.0%), older (52.6±13.4 versus 49.8±13.3), had a lower Body Mass Index (26.5±5.1 versus 27.8±6.0), smoked less (13.9% versus 20.4%), consumed more alcohol (48.4% versus 36.6%), and had fewer comorbidities (62.9% versus 50.1% with one comorbidity).

CONCLUSION: This study identified four trajectories of HR-QoL: 'fluctuating', 'recovery', 'high' and 'low'. The associated personal and lifestyle related factors will help healthcare professionals to identify vulnerable patients and provide them with tailored advice regarding a physically active and healthy lifestyle.