

Performance of PROMIS Global-10 to Legacy Instruments for Lateral Epicondylitis

Joseph B. Kahan¹, Allen D. Nicholson¹, Maarouf A. Saad¹, Hafiz F. Kassam¹, David Kovacevic¹

¹Department of Orthopædics and Rehabilitation, Yale School of Medicine, New Haven, CT.

INTRODUCTION

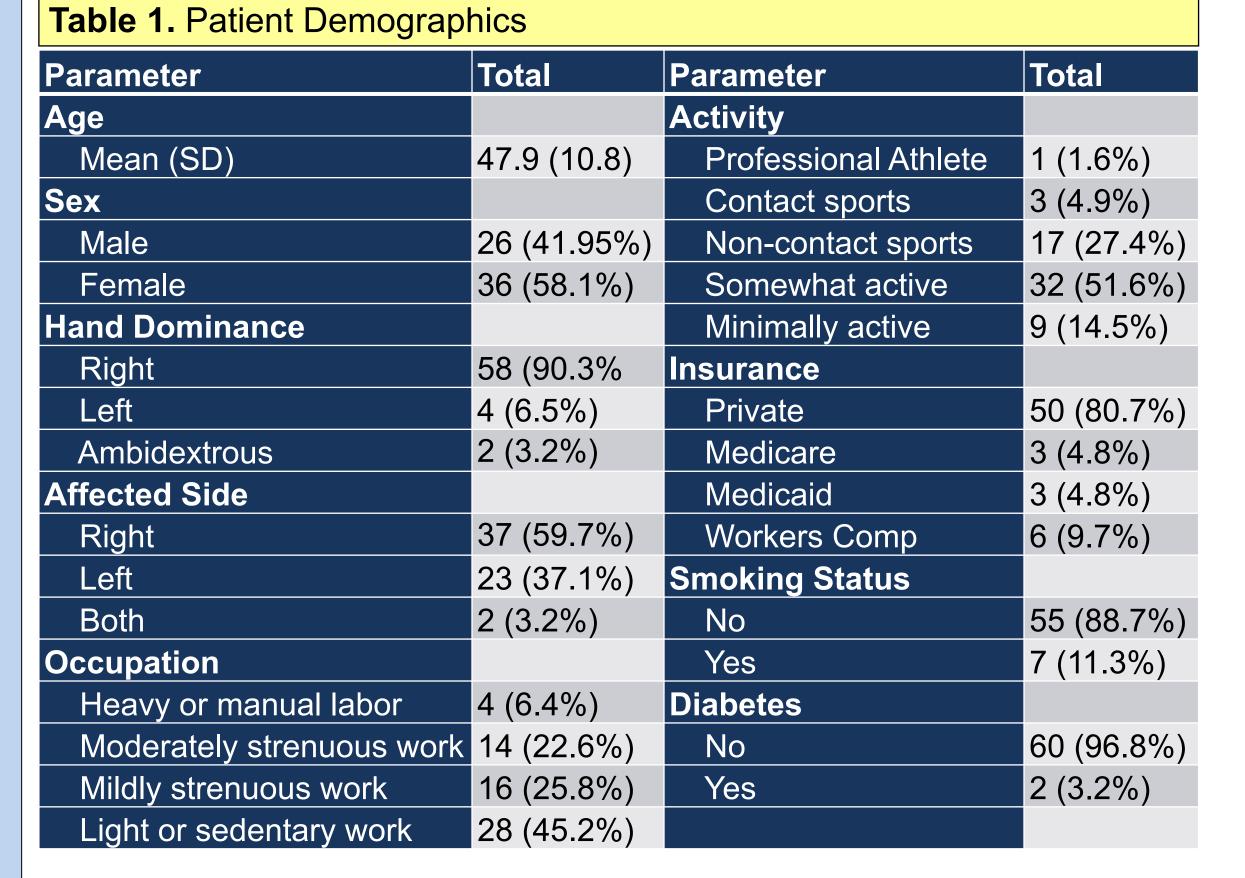
- Patient reported outcomes (PRO) are designed to self-assess patient function, including lifestyle, emotional health, work, and measure response to interventions. Some general health PROs can be used to calculate quality-adjusted life years (QALYS) for economic analysis. Traditional PROs have many questions, and require completion of all questions for grading. Large numbers of questions may reduce patient compliance.
- > In 2004 the National Institute of Health began creation of a new series of publicly available, more efficient PROs designed to cover multiple health domains and allow assessment of various diseases and chronic conditions. The goal was to lower patient test burden and improve PRO measurement precision. Item response theory was utilized to assess the relation of questions to each other within health domains.
- Some of the PROMIS PROs that have been used in orthopedics are the PROMIS physical function computer adaptive test (PF-CAT), as well as the PROMIS upper extremity (UE) short form and computer adaptive test (CAT). These have been validated for meniscal injury, shoulder instability, glenohumeral arthritis, and rotator cuff disease.
- The PROMIS Global-10 is a general health PRO designed to replace the EQ-5D and SF-12. It consists of ten questions. Respondents receive a raw physical health score and mental health score. They also receive a normalized physical and mental "T-score" where 50 represents the US population average and the standard deviation is 10. An estimated EQ-5D score can be calculated.
- The PROMIS Global-10 has not been previously validated for specific orthopedic pathologies. As a general wellness PRO, it could potentially be used across orthopedic subspecialties and other medical specialties.

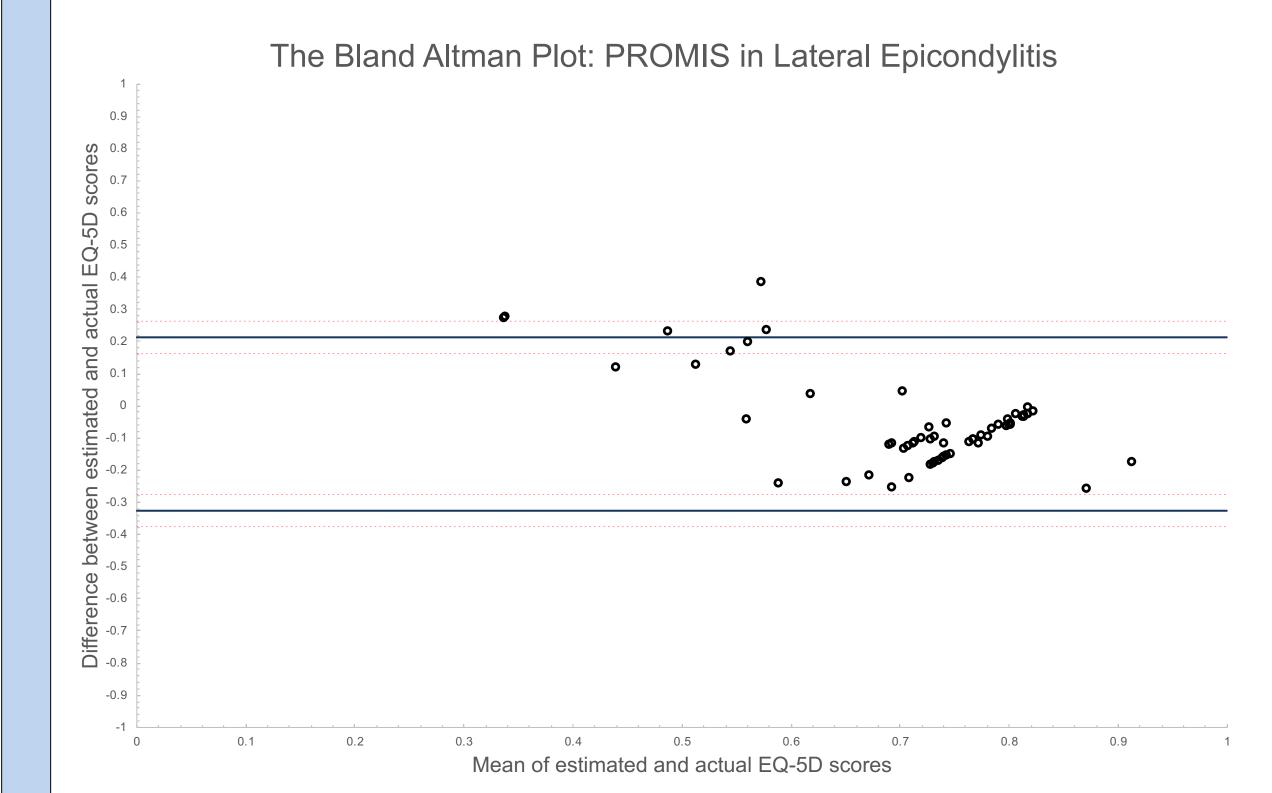
GOAL

Validate the PROMIS Global-10 for lateral epicondylitis to legacy PROs

We hypothesize that (1) there is moderate to high correlation between the PROMIS Global-10 and gold-standard PROs (ASES, EQ-5D, MEPS, QD), (2) PROMIS Global-10 will not show ceiling effects, and (3) estimated EQ-5D scores will show good correlation and low variance with actual EQ-5D

RESULTS





Fair

Good

Poor

$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	Table 2. PRO scores summary									
PROMIS Global-10 Mental Health 4-20 15.6 ± 3.3 $16.0 (5.0-20.0)$ PROMIS Global-10 Physical T-Score 0-100 45.3 ± 6.7 $44.9 (29.6-61.9)$ PROMIS Global-10 Mental T-Score 0-100 53.1 ± 9.0 $53.3 (25.1-67.6)$ EQ-5D 0-1 0.7 ± 0.2 $0.8 (0.2-1.0)$ PROMIS Estimated EQ-5D 0-1 0.7 ± 0.1 $0.7 (0.5-0.8)$ ASES 0-100 55.5 ± 15.7 $55.9 (21.2-86.8)$ MEPS $0-100$ 50.0 ± 14.9 $50.0 (0.0-80.0)$		Scale	Mean ± SD	Median (Range)						
PROMIS Global-10 Physical T-Score 0-100 45.3 ± 6.7 $44.9 (29.6-61.9)$ PROMIS Global-10 Mental T-Score 0-100 53.1 ± 9.0 $53.3 (25.1-67.6)$ EQ-5D 0-1 0.7 ± 0.2 $0.8 (0.2-1.0)$ PROMIS Estimated EQ-5D 0-1 0.7 ± 0.1 $0.7 (0.5-0.8)$ ASES 0-100 55.5 ± 15.7 $55.9 (21.2-86.8)$ MEPS $0-100$ 50.0 ± 14.9 $50.0 (0.0-80.0)$	PROMIS Global-10 Physical Health	4-20	14.0 ± 2.4	14.0 (8.0-19.0)						
Score $0-100$ 45.3 ± 6.7 $44.9 (29.6-61.9)$ PROMIS Global-10 Mental T-Score $0-100$ 53.1 ± 9.0 $53.3 (25.1-67.6)$ EQ-5D $0-1$ 0.7 ± 0.2 $0.8 (0.2-1.0)$ PROMIS Estimated EQ-5D $0-1$ 0.7 ± 0.1 $0.7 (0.5-0.8)$ ASES $0-100$ 55.5 ± 15.7 $55.9 (21.2-86.8)$ MEPS $0-100$ 50.0 ± 14.9 $50.0 (0.0-80.0)$	PROMIS Global-10 Mental Health	4-20	15.6 ± 3.3	16.0 (5.0-20.0)						
$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		0-100	45.3 ± 6.7	44.9 (29.6-61.9)						
PROMIS Estimated EQ-5D 0-1 0.7 ± 0.2 $0.8 (0.2-1.0)$ ASES 0-100 55.5 ± 15.7 $55.9 (21.2-86.8)$ MEPS 0-100 50.0 ± 14.9 $50.0 (0.0-80.0)$	PROMIS Global-10 Mental T-Score	0-100								
ASES $0-100$ 55.5 ± 15.7 55.9 $(21.2-86.8)$ MEPS $0-100$ 50.0 ± 14.9 50.0 $(0.0-80.0)$	EQ-5D	0-1	0.7 ± 0.2	0.8 (0.2-1.0)						
MEPS $0-100 55.5 \pm 15.7 55.9 (21.2-86.8)$	PROMIS Estimated EQ-5D	0-1	0.7 ± 0.1	0.7 (0.5-0.8)						
$0-100 50.0 \pm 14.9 50.0 (0.0-60.0)$	ASES	0-100	55.5 ± 15.7	55.9 (21.2-86.8)						
QD 0-100 38.8 ± 22.3 38.6 (4.6-91.0)	MEPS	0-100	50.0 ± 14.9	50.0 (0.0-80.0)						
	QD	0-100	38.8 ± 22.3	38.6 (4.6-91.0)						

Table 3. Correlation of PROMIS Global-10 to Gold-Standard PROs

R value	P-value	Strength	
0.72	<0.0001	Excellent	
0.58	< 0.0001	Good	
0.61	<0.0001	Excellent – Good	
0.64	<0.0005	Excellent – Good	
0.26	=0.0492	Poor	
0.37	=0.0038	Poor	
0.50	<0.0001	Good	
	0.72 0.58 0.61 0.64 0.26 0.37	0.72 <0.0001 0.58 <0.0001 0.61 <0.0001 0.64 <0.0005 0.26 =0.0492 0.37 =0.0038	

Plot demonstrating the difference between the actual EQ-5D score and the estimated EQ-5D score from PROMIS (vertical axis) and the average of actual EQ-5D score and the estimated EQ-5D score (horizontal axis). Each dot represents one respondent. The blue lines are the lower and upper 95% limits of agreement, and the red lines are the lower and upper 95% confidence interval for the lower and upper limits.

The mean difference between PROMIS Global-10 estimated EQ-5D scores and actual EQ-5D scores was -0.0564 on a scale of 0 to 1, indicating that the scores were similar overall. However, on a scoring scale of 0 to 1, any individual estimated score could range from -0.33 to 0.21 below or above the actual EQ-5D score, respectively.

Number of Questions
10
7
4-12
7
11
10
6

METHODS

- Patient cohort: 62 patients with lateral epicondylitis were prospectively enrolled before treatment from January 2015 to October 2017. They were above age 18, English-speaking, and provided informed consent.
- Each patient completed the PROMIS Global-10, EQ-5D, ASES shoulder assessment form, Mayo Elbow **Performance Score (MEPS)** assessment form, and QuickDash (QD).
- Spearman correlations were calculated between PROs. Bland-**Altman Agreement tests were** conducted between estimated EQ-5D scores from PROMIS and actual EQ-5D scores.
- Ceiling and floor effects were assessed, defined as ≥15% respondents with highest or lowest possible score

PROMIS Global-10

Excellent

Please respond to each item by marking

one box per row

Re-code Global07. The recoded score ranges from 1 to 5.

(0 No pain =5; 1, 2, or 3 =4; 4, 5, or 6 =3; 7, 8, or 9 =2; 10 worst pain imaginable =1)

Global Physical Health score = SUM responses to G03 + G06 + G07 + G08.

Global Mental Health score = SUM G02 + G04 + G05 + Global 10.

Scoring:

After recoding, the

	One box per row					
Global 01	In general, would you say your health is:	5	4	3	2	1
Global 02	In general, would you say your quality of life is:	5	4	3	2	1
Global 03	In general, how would you rate your physical health?	5	4	3	2	1
Global 04	In general, how would you rate your mental health, including your mood and your ability to think?	5	4	3	2	1
Global 05	In general, how would you rate your satisfaction with your social activities and relationships?	5	4	3	2	1
Global 09	In general, please rate how well you carry out your usual social activities and roles. (This includes activities at home, at work and in your community, and responsibilities as a parent, child, spouse, employee, friend, etc.)	5	4	3	2	1
				· · · · · · · · · · · · · · · · · · ·	,	
		Completely	Mostly	Moderately	A Little	Not At All
Global 06	To what extent are you able to carry out your everyday physical activities such as walking, climbing stairs, carrying groceries, or moving a chair?	5	4	3	2	1
	In the past 7 days	Never	Rarely	Sometimes	Often	Always
Global 10	How often have you been bothered by emotional problems such as feeling anxious, depressed or irritable?	5	4	3	2	1
		None	Mild	Moderate	Severe	Very Severe
Global 08	How would you rate your fatigue on average?	5	4	3	2	1
Global 07	How would you rate your pain on average?	0 1 2 No Pain	3 4	5 6 7	8 9 Ima	10 Worst ginable Pain
	Canadan					

CONCLUSIONS

- PROMIS Global-10 physical function scores show high correlation with gold-standard PRO instruments for lateral epicondylitis
- > Revicki examined PROMIS Global 10 and found similar limits of agreement of -0.2 to 0.2 between estimated and actual EQ-5D scores.
- ➤ No floor or ceiling effects for PROMIS Global-10 in lateral epicondylitis.
- > This suggests PROMIS Global-10 is a reliable tool for outcome assessment in lateral epicondylitis.
- > PROMIS Global-10 has the potential to be used for pathologies and diseases across multiple treating specialties.
- > The large 95% limit of agreement on Bland-Altman analysis suggests estimated EQ-5D scores cannot replace traditional EQ-5D scores.
- > Estimated EQ-5D scores may not be suitable for quality-adjusted life years (QALYS) derived from EQ-5D scores for economic analysis.

REFERENCES

- > Kahan, J.B., Nicholson, A. D., Saad, M.A., Kassam, H. F., & Kovacevic, D. (2019). Performance of PROMIS Global-10 Compared With Legacy Instruments for Lateral Epicondylitis. *Arthroscopy*.
- > Revicki DA, Kawata AK, Harnam N, Chen W-H, Hays RD, Cella D. Predicting EuroQol (EQ-5D) scores from the patientreported outcomes measurement information system (PROMIS) global items and domain item banks in a United States sample. Quality of Life Research. 2009;18:783-791.