Relationship between symptom load of gastro-oesophageal reflux disease and health-related quality of life, work productivity, resource utilization and concomitant diseases: survey of a US cohort.


Source
peter.wahlqvist@astrazeneca.com

Abstract

BACKGROUND:
Analysis of the burden of gastro-oesophageal reflux disease (GERD) in relation to the severity and frequency of symptoms is essential to identify individuals and groups in whom targeted management is justified.

AIM:
To describe the relationship between symptoms of GERD and self-reported health-related quality of life (HRQL), work productivity, healthcare utilization and concomitant diseases.

METHODS:
US respondents to the Internet-based 2004 National Health and Wellness Survey who had self-reported GERD (n = 10,028, mean age: 52 years, 58% female) were age- and gender-matched to a control group without GERD (n = 10,028). Respondents with GERD were classified according to symptom severity and frequency. HRQL and productivity were assessed using the Short-Form 8 survey (SF-8) and Work Productivity and Activity Impairment questionnaire, respectively.

RESULTS:
Symptom frequency increased with increasing symptom severity. Compared with controls, respondents with GERD had more concomitant diseases [mean difference (MD): 1.6], lower SF-8 physical and mental health scores (MD: 4.1 units and 3.1 units, respectively), increased absenteeism (MD: 0.9 h/week), reduced percent productivity at work (MD: 7.5%) and increased
healthcare utilization. All tested variables deteriorated with increasing symptom severity and/or frequency.

CONCLUSIONS:

Increasing severity and frequency of GERD symptoms is associated with more concomitant diseases, lower HRQL, lower work productivity and increased healthcare utilization, suggesting that patients with moderate or severe GERD should receive targeted management with the most effective treatment strategies.

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