HEALTH-RELATED LIFE QUALITY OF PRACTICALLY HEALTHY PEOPLE RESIDING IN ALMATY CITY (KAZAKHSTAN)

MOS SF-36 questionnaire was used to study healthrelated quality of life of 50 practically healthy people of Almaty city (Kazakhstan). The quality of life of city inhabitants turned out to be quite high: all indices approached 100-score mark. The received data can be used for the comparative medical observations. INKAR SAGATOV

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Introduction

In domestic and abroad literature it is possible to read analysis that are based on questioning of practically healthy people using Medical Outcomes Study 36-Item Short-Form Health Survey; they discuss the life quality connected with health (Brazier, Harper, Jones et al., 1992; Jenkinson, Wright, and Coulter, 1994; Lyons, Perry, and Littlepage, 1994; Van den Bosch, Roos-Hesselink, Van Domburg et al., 2004; Ware and Sherbourne, 1992). These studies were conducted in cardiologic and cardiosurgical centers of USA, in namber of European countries, in different regions and constituents of the Russian Federation. Unfortunately, in Kazakhstan there are no similar publications; this fact makes it difficult to make a comparative evaluation of received results. It is believed that quality of life of people, residing in different countries and regions, is likely different; and this is presumably conditioned by many objective causes (environment, social security system of citizens, level of medical servicing, household conditions, availability of work, conditions of labor, etc.).

The paper focuses om studying of life quality connected with health in practically healthy people residing on the territory of Almaty city (Kazakhstan) with use of questionnaire MOS SF-36.

Material and methods

During second half-year period of year 2009, 50 people, residing in Almaty (Kazakhstan) and not having at the survey period any problems with their health, had been examined. They were active, working or studying, many of them were in a happy marriage with children. Absolute majority of the studied people were receiving statistically average salary. In addition, a contingent of people surveyed was quite diverse, as evidenced by the obtained general information about them.

We did not aim to explore deeper any social aspects, but for us it was sufficient that most people interviewed did not belong to any one social class, and represented a group of men of average living standards. Study purpose made us focused on data discribing their education, employment state, marital status, incomes, as well as the presence of children and living conditions.

The average age of people surveyed at the time of filling in the questionnaire MOS SF-36 was 37.4 ± 6.1 years. The youngest respondent was 24 years old, the oldest - 61 years.

For estimation of life quality the questionnaire of general profile MOS SF-36 was used. Data processing, including statistical review was carried out using Excel, Access and Statistica 5.5.

Results

The data obtained indicate that all scores of the questionnaire MOS SF-36 are quite high: they are above the 50-point level and approach to a 100-point mark (Table 1).

These data have no any prognostic value, because it is obvious, that practically healthy people in majority of cases are free from any problems restricting their physical, social and psychological lifestyle. However results, received during the given research represent certain interest from the position of their comparison with indices, received in analogous conditions but in other contingent of people (for example, in people with congenital or acquired cardiac malformation and major vessels, ischemic heart disease, etc.).

TABLE 1. DATA OF QUESTIONNAIRE MOS SF-36 IN STUDY OF 50 PRACTICALLY HEALTHY PEOPLE OF ALMATY CITY (KAZAKHSTAN)

Scale of MOS SF-36	M±m
Physical functioning	91.4 ± 6.0
Role physical functioning	85.0 ± 9.8
Pain	87.6 ± 8.0
General health	67.9 ± 8.4
Viability	75.5 ± 6.6
Social functioning	83.8 ± 7.5
Role emotional functioning	90,0 ± 10,9
Psychological health	77,5 ± 6,9

Conclusion

Study of 50 practically healthy people, residing in Almaty city (Kazakhstan) has shown their quite high quality of life, connected with health. Not only physical but also psychological components of the questionnaire MOS SF-36 certify it.

The received data on quality of life of 50 practically healthy people, residing in Almaty city (Kazakhstan), assumably can be used for their comparison with indices of questionnaire MOS SF-36, received in other contingent of people, including people having pathology from cardiovascular system side.

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