

### THE MACNEW HEART DISEASE QUESTIONNAIRE: A SUITABLE QUESTIONNAIRE FOR PATIENTS WITH MYOCARDIAL INFARCTION AND ANGINA?

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Health-related quality of life (HRQL) is an increasingly important and acceptable outcome to clinicians and patients when considering the effectiveness of clinical interventions. The MacNew Heart Disease Questionnaire (MacNew) is a disease specific HRQL instrument, originally developed in English for patients with myocardial infarction (MI). We have translated the instrument into German and assessed the instrument's validity, reliability and responsiveness in two separate patient cohorts. Patients with angiographically documented angina pectoris (n=206, 67.7% male) and patients with documented MI (n=258, 80.9% male) received the self-administered MacNew. Test-retest reliability, intra-class correlation, Cronbachs alpha, convergent and discriminate validity coefficients, and confirmatory factor analyses were performed.

The completion rate in both patient samples was acceptable (76.8% angina; 77.1% MI). Test-retest coefficients exceeded rtt 0.70 and Cronbachs alpha was >.90 in both cohorts for all scales. Confirmatory factor analyses supported the original 3 factor structure (explaining 70,15% variance) in both the angina and MI cohorts (CFI= .92; RMSEA =.065).

We conclude that the MacNew is valid and reliable in German. The MacNew assesses HRQL in patients with angina and in patients with MI, is acceptable, and has psychometric properties similar to the English version. Further investigations in pacemaker patients and in patients with heart failure are subject of ongoing research. If similar findings can be found in those patients, the MacNew can be considered as a general heart questionnaire to assess disease specific HRQL in patients with different kinds of heart disease.

### CONFIRMATORY FACTOR ANALYSIS OF THE FRENCH VERSION OF THE PAIN BELIEFS AND PERCEPTIONS INVENTORY

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Background: The assessment of cognitive factors in chronic pain patients is becoming recognized as an important component in comprehensive pain evaluation. Patients' beliefs about chronic pain have been shown to be related to adjustment and compliance with treatment programs. The Pain beliefs and Perception Inventory (Williams et Thorn, 1989) is a 16-item questionnaire that is designed to measure several important aspects of patients' beliefs about their chronic pain. The factorial structure of the PBPI was investigated in five studies which have yielded 3 or 4 factors.

Objective: The purpose of this study is to test the factor structure of the French version of the PBPI.

Method: The French version of the PBPI was administered to 142 chronic pain patients. Confirmatory factor analyses (Lisrel 8) were performed to test models suggested by the above exploratory analyses.

Results: The confirmatory structural analysis that we performed on the two models of factor structures of the PBPI previously reported confirms the best fit of the four factor model (GFI=0,86; RMR=0,05; Chi2/ddf=2,37).

### FRENCH VALIDATION OF THE PERCEIVED STRESS SCALE: THE CONSTRUCT VALIDITY

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OBJECTIVE. The Perceived Stress Scale (PSS, Cohen et al., 1983) is a questionnaire assessing the degree to which situations in one's life are appraised as stressful. This scale is composed of 14 items (PSS-14) and can be reduced to 10 (PSS-10) or 4-item (PSS-4) version. All of the 3 original versions present good psychometric qualities.

METHOD. The French adaptation of the PSS was administered to 460 male and female subjects (250 social sciences students and 210 health professionals). Mean age was 31.21 (SD=11.24). Principal component analyses were performed on the 460 subjects' answers to the PSS-14, PSS-10 and PSS-4.

RESULTS. For the PSS-14, the analysis yielded three axes (eigenvalue>1.00). As 13 of the 14 items had notable loadings on the first axis, we chose to retain only this axis, accounting for 43.9% of the total variance. This axis, composed of 13 items, was interpreted as a Perceived Stress factor. Its internal consistency was satisfactory (alpha of Cronbach = 0.89). Analyses performed on the short versions also revealed one Perceived Stress factor, with satisfactory internal consistency (alpha = 0.87 for PSS-10 and 0.79 for PSS-4).

CONCLUSION. The French version of the PSS present good construct validity. The three versions of the PSS are very useful to assess perceived stress in an economic and rapid way.

### THE COGNITIVE EMOTION REGULATION QUESTIONNAIRE (CERQ)

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Emotion regulation or coping is assumed to be an important factor in determining well being and successful functioning. In most current measures on coping, the strategies can both be carried out through either cognitive or behavioral channels. In order to measure coping strategies in a conceptually pure way, we need to measure cognitive and behavioral strategies separately. Therefore, a new questionnaire, named the Cognitive Emotion Regulation Questionnaire (CERQ), has been constructed, measuring nine cognitive coping strategies people tend to use after having experienced traumatic or negative life events. The following cognitive coping strategies are measured: self-blame; other-blame; acceptance; refocus on planning; positive refocusing; rumination or focus on thought; positive reappraisal; putting into perspective; and catastrophizing. The psychometric qualities of the CERQ has been studied within several populations and appeared to be good. The CERQ and its psychometric qualities will be presented.

### EXAMINATION OF THE VALIDITY AND RELIABILITY OF THE PORTUGUESE VERSION OF THE SCHOOL-AGE TEMPERAMENT INVENTORY (SATI) BY McCLOWRY, 1995

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The purpose of this study was to develop a portuguese version of the School-age temperament Inventory (SATI), a parental report instrument aimed to measure temperament in children and adolescents. To achieve conceptual and technical equivalence we used an iterative process of forward and backward translations and the Portuguese version of the SATI was then administered to a sample of 211 parents of children and adolescents. Most of the questionnaires were completed by mothers (74,4%), and the remaining by the father (29,9%) or by the two parents (4,7%). The children were from 8 to 12 years, averaged 9,75 years of age, and equally distributed by sex. Principal factor analysis with varimax rotation resulted in a four-factor solution which supports, in general, the underlying dimensions which are: task persistence, negative reactivity, approach/withdrawal and energy. Cronbach's alphas were satisfactory and demonstrate that this version of SATI is reliable. The Portuguese version of SATI has good psychometric properties and seems to be a good instrument for use in research and clinical programs namely those aimed to study the relationship between children and adolescents' temperament and their adaptation to illness and chronic disease.

#### PSYCOMETRIC PROPERTIES OF THE PORTUGUESE VERSION OF THE PEDIATRIC QUALITY OF LIFE INVENTORY, VERSION 4.0 GENERIC CORE SCALE FOR CHILDREN AGED 8 TO 12

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This study describes the adaptation and psychometric study of the self-report generic core scale of PedsQL - Pediatric Quality of Life Inventory (Varni, Seid et Kurtin,1999), a modular instrument for measuring health-related quality of life in children and adolescents. Conceptual and technical equivalence were achieved through an iterative process of forward and backward translations and the Portuguese version of the PedsQL was then administered to a sample of 381 children and adolescents. We used a sample of healthy school children recruited in 3 schools from Oporto's district, 207 (45,7%) girls and 174 (54,3%) boys, aged 8 to 12 and with a average age of 10,05. The examination of the PedsQL factor structure was undertaken using principal components factor analysis with oblique rotation. The results were not consistent with the analysis conducted in the development of the instrument and suggested the elimination of 3 items. The Portuguese version resulted then in only 20 items which were also submitted to a factor analysis and revealed a 5 factor structure, similar to a priori conceptually-derived scales. Internal consistency reliability for the Total Scale Score ( $\alpha=0,85$ ), Physical Health Summary Score ( $\alpha = 0,74$ ) and Psychosocial Health Summary Score ( $\alpha = 0,81$ ) were quite satisfactory.

#### ADAPTATION OF THE SCHOOLAGERS' COPING STRATEGIES INVENTORY TO A PORTUGUESE SAMPLE OF CHILDREN AGED 8 TO 12

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This poster describes the adaptation and the psychometric study of the Schoolagers' Coping Strategies Inventory (SCSI) (Ryan-Wenger,1990) in a sample of Portuguese children. The SCSI is a self-report instrument that measures the frequency and effectiveness of children's stress-coping strategies. The authors also aimed to describe the children's coping strategies and to examine age and gender differences.

Subjects were 291 children, aged 8 to 12 (average age of 10,03 years) and recruited in 3 different schools from Oporto's District and the inventory was administered with the collaboration of the schools' psychologist. Scale-level and item-level measurement properties were computed. The Portuguese version of SCSI has good psychometric properties and results revealed a three-factor structure, corresponding to three types of coping strategies, which can be conceptualised as cognitive-behavioural distraction, acting out and active strategies. Results also showed that children and pre-adolescents use a wide variety of coping strategies, and that there are different patterns of use and different perceptions of efficacy according to age and gender.

#### VALIDITY OF THE ZULLIGER TEST IN ANXIETY ASSESSMENT

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The purpose of this study was to establish the validity of the Zulliger Test for the evaluation of anxiety. The objectives under focus aimed, on one hand, at the validity of the evaluation of anxiety through a projective technique (Zulliger Test) in socially desirable conditions, and on the other hand, at the highlighting a set of valid markers of anxiety in the Zulliger Test. The examined samples were formed by 165 persons (non-anxious, anxious and patients with anxiety disorders - according to DSM-IV), aged between 25-45. The experimental basis relies on the Zulliger Individual and Group Test (ZIGT), Rorschach Test, State-Traite Anxiety Inventory and Cattell Anxiety Questionnaire. Both samples of non-anxious and anxious persons were submitted to Zulliger Test in standard condition and in condition of solicitation of socially desirable answers. In order to analyse the data of the ZIGT, I used the J.E. Exner's (1986) comprehensive system. The results show that the data collected from the ZIGT wasn't significantly influenced by the social desirability condition. It was possible to establish set of valid markers from the ZIGT for revealing the anxiety (which correlates significantly with the anxiety markers from Rorschach test and also with the scores from STAI and Cattell). The application of the ZIGT as a screening instrument for anxiety seems to be an adequate one, taking into consideration the limits of the ZIGT in anxiety disorders assessment.

#### THE VALIDATION OF TWO NEW SCALES IN QUALITY OF LIFE AND SOCIAL COMPARISON RESEARCH

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**Aims:** The aims of this study were to design and validate two new questionnaires for assessing quality of life and social comparison in a chronically ill population: a) a subjective quality of life scale (Subj QoL); b) a social comparison scale (S/C) which measures the use of social comparisons gained from reading a self-help group newsletter.  
**Method:** Six hundred postal questionnaires were administered to a random sample of members of a self-help group for patients with a chronic illness (the Meniere's Society). The study yielded a 34% response rate. The questionnaires administered were; the SF-36; Subj QoL; Identification/Contrast questionnaire; S/C; three disease severity scales, namely the Vertigo Symptom Scale, the Subjective Tinnitus Severity Questionnaire, and an auditory disability questionnaire; a self-help group questionnaire; and demographics.