

# Chaban's Quality of Life Scale in psychosomatic patients with anxiety-depressive disorders

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1. Physical state	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
2. Mood	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
3. Spending spare time	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
4. Love, sexual activity	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
5. Daily activity (hobbies, work at home, etc.)	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
6. Social activity (communication with relatives, friends, etc.)	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
7. Financial well-being	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
8. Accommodation conditions	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
9. Work, study, and other employment	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10
10. Overall level of life satisfaction	0	▶	1	▶	2	▶	3	▶	4	▶	5	▶	6	▶	7	▶	8	▶	9	▶	10

**Keywords:** psychosomatic patients, anxiety-depressive disorders, quality of life

**Background and Aims:** The quality of life of psychosomatic patients is the most sensual marker of the cure effectiveness, which combines physical, mental and social components. The new Chaban's Quality of Life Scale (CQLS) been developed and validated in the healthy volunteers. We evaluated the quality of life of psychosomatic patients with anxiety-depressive disorders on a scale (CQLS).

**Methods:** 63 patients (mean age 46.7 years) with psychosomatic diseases, arterial hypertension, coronary heart disease) and anxiety-depressive disorders (F41.2) were twice assessed on the 10-items scale CQLS (at the baseline and at the end of treatment - 21 day), with an interval of 0-100 points.

**Results:** At the beginning of the study, quality of life was 57.3 points, which corresponded to a low level of quality of life. After treatment, the quality of lifewas 74.5 points (average level). The most sensitive items were physical condition, mood, everyday activity and general satisfaction with life. Items of social activity, financial well-being, living conditions remained unchanged. The Cronbach's  $\alpha$  coefficient was 0.903 in CQLS. The correlation coefficient between tests and repeated tests confirmed the reliability of CQLS ( $r = 0,918$ ;  $p < 0,001$ ).

**Conclusions:** Short-term treatment of psychosomatic patients with anxiety-depressive disorders improves their quality of life ( $p < 0.005$ ), but changes relate only to individual items. The CQLS scale has proven acceptable reliability and validity, which allows us to recommend it for further use.

1. Chaban O., Khaustova O., Bezsheiko V. New Quality of Life Scale in Ukraine: reliability and validity Indian Journal of Social psychiatry, Vol. 32, Issue 4, Oct-Dec 2016, p. 473.

2. Chaban O., Khaustova O., Bezsheiko V. Reliability and validity of Chaban Quality of Life Scale // 29 cong. ECNP, 18—22 sep., 2016, Vienna. Post. P2h301.

