50% of cases with ELM disruption, and 34.2% of cases with disruption in IS/OS, and 24.5% of cases with atrophic changes in the external retina (Stargardt disease, retinoschisis linked to chromosome X and cone dystrophy) (Fig. 1). ORT was not observed in dystrophies characterized by lipofuscin deposits.

ORT appears to be a frequent finding in SD-OCT of macula dystrophies with atrophic changes in the cytoarchitecture of the external retina and could constitute a late event in retinal degeneration, closely associated to ELM disruption. New studies with a higher number of patients must be carried out to assess the usefulness of this finding in the follow-up and prognostic evaluation of these patients as well as for its possible use in monitoring the neuroprotective effect of new therapies in development.

REFERENCES


Use of quality of life questionnaires for the evaluation of patients subjected to cataract surgery

Uso de cuestionarios de calidad de vida para la evaluación de pacientes sometidos a cirugía de catarata

Dear Sir,

In the past decades the use of quality of life questionnaires as instruments based on patient reporting has increased. However, said questionnaires have been utilized mainly in research while their application in ophthalmological medical practice is largely ignored.

Conventionally, post-surgery evaluations include visual acuity, biomicroscopy findings and the presence of new symptoms. Quality of life questionnaires provide an additional tool to obtain an evaluation including the patient point of view as regards functional condition of the eyesight and satisfaction. In order to obtain a comprehensive assessment of a patient, the latter aspect is important and should be taken into account. On the other hand, it is also important to take into account the costs and time involved in the execution of said questionnaires. Even so, it is the best way to assess the therapeutic response and avoid discrepancies that could arise between visual acuity measurement and the patients visual impairment.

The benefit of the above-mentioned instruments depends on their correct application. In order to choose the most appropriate questionnaires, it is important to know that some instruments make a better evaluation of the quality of life

| Table 1 – Main characteristics of 4 instruments for measuring quality of life in ophthalmology. |
|-----------------|-----------------|-----------------|-----------------|-----------------|
|                 | Original language | Number of questions | Validation into Spanish | Cronbach |
| ADVS            | English          | 22               | No              | $\alpha \geq 0.90$ |
| Cataract type specification questionnaire | English | 12               | No              | $\alpha \geq 0.94$ |
| Catquest        | English          | 19               | No              | $\alpha \geq 0.93$ |
| NEI VFQ 25      | English          | 25               | Yes             | $\alpha \geq 0.86$ |


Please cite this article as: Luján S, et al. Uso de cuestionarios de calidad de vida para la evaluación de pacientes sometidos a cirugía de catarata. Arch Soc Esp Oftalmol. 2013;88:162–3.
related to ocular health and specific ocular diseases such as cataracts (Table 1). Lundström and Pesudovs analyzed the psychometric properties of some quality of life questionnaires used in patients with cataracts and concluded that some details influenced the usefulness of said questionnaires in a given population, such as the degree of average impairments caused by cataracts in patients when taking the decision to undergo surgery, the average level of education of patients as well as cultural differences and other characteristics of each population.

In order to define the appropriate time of application of the quality of life questionnaire after cataract surgery, Limburg et al. observed that the group of patients who exhibited a poor response in the first weeks after surgery tend to reach the optimum vision level between 4 and 6 months after surgery. The most appropriate time before applying said questionnaire should be an interval of 12 weeks post-surgery, which is the mean follow-up time recommended after the operation.

To conclude, it is necessary to promote the appropriate and careful use of quality of life questionnaires in patients submitted to cataract surgery, taking into account the characteristics of the population to be assessed in order to enable a comprehensive assessment of patients for physicians.

REFERENCES


S. Luján *, M. Alburquerque, O. Pizango

Escuela de Medicina, Universidad Peruana de Ciencias Aplicadas, Lima, Peru

* Corresponding author.
E-mail address: si_lujan@yahoo.com
(S. Luján).

2173-5794/$ – see front matter
© 2012 Sociedad Española de Oftalmología. Published by Elsevier España, S.L. All rights reserved.