

Quality of Life Assessment in Elderly Polyarthrosis

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ABSTRACT

Background: Osteoarthritis (OA) is the most common degenerative joint disease in the elderly. The often multifocal location at this age can be a source of pain, and limitation of everyday activities, thus affecting their quality of life (QOL).

The objective of our work was to evaluate of the impact of polyarthrosis on the QOL among patients affected by OA.

Methods: A cross-sectional, descriptive study was done in 2017. Patients aged 65 years and over were included, and followed for polyarthrosis according to the criteria of Lawrence J.S. A clinical evaluation (anthropometric data, postural examination, and joint assessment) was made. The quality of life was studied by the SF36 scale translated into Tunisian dialect and the OAKHQOL questionnaire, specific for lower limb arthrosis.

Results: Fifty patients were included. The mean age was 71 years with a sex ratio (M/F) of 0.4.

Almost all of our patients had knee osteoarthritis (98% of cases), spinal involvement was in the second position (88%). We noted an alteration of the different physical health items of the SF-36 predominant in the areas of physical limitation, general health and emotional limitation, as well as the physically under-score (28/100) which was significantly lower than the mental under-score (52/100). The quality of life was impaired in the dimensions of social functioning and physical activities assessed by the OAKHQOL.

Factors associated with poor QOL were: Female gender, spinal osteoarthritis, diabetes and heart disease as comorbidities and lack of functional rehabilitation ($p < 0.05$).

Conclusion: Polyarthrosis is accompanied by an alteration of the QOL in the elderly. Factors associated with QOL impairment should be considered in the patient management program.