

Research Summary – Sickness Impact Profile 68 (SIP68) – Quality of Life

Author Year Research Design Setting (country)	Demographics and Injury Characteristics of Sample	Validity	Reliability	Responsiveness Interpretability
<p>Post et al. 2001</p> <p>Cross-sectional, using a combination of 3 samples</p> <p>Research lab</p>	<p>N=111 wheelchair- using people (55=SCI and 56=other)</p> <ul style="list-style-type: none"> - Athletes = 49 (SCI = 23, other = 26) - SCI = 32 - Rheumatic disease = 30 <p>Mean age=athletes 36.5, SCI 38.2, Rheumatic disease 69.9</p>	<p>Authors expected moderate to strong correlations between scales of the Nottingham Health Profile (NHP) and the SIP68 with criterion variables, with comparable correlations between scales of each questionnaire that are considered to measure the same aspects of health and the criterion variables.</p> <p>Scales of NHP & SIP68 with Spearman ρ correlations >0.30 (all P<0.01): NHP SA w/ SIP68 Physical Mobility: $\rho=0.68$</p>	<p>Internal Consistency: $\alpha = 0.88$</p>	

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		NHP ES w/ SIP68 Emotional reactions: $\rho=0.56$ NHP SB w/ SIP68 Emotional reactions: ρ $= 0.41$ NHP PAC w/ SIP68 Emotional reactions: $\rho=0.43$ NHP ES w/ SIP68 Social isolation: $\rho=0.41$ NHP SB w/ SIP68 Social isolation: $\rho=0.35$ NHP PAC w/ SIP68 Social isolation: $\rho=0.43$ NHP ES w/ SIP68 Pain: $\rho=0.36$ NHP SB w/ SIP68 Pain: $\rho=0.54$ NHP MR w/ SIP68 Pain: $\rho=0.38$ NHP PAC w/ SIP68 Pain: $\rho=0.35$ NHP ES w/ SIP68 Energy: $\rho=0.46$		

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		<p>NHP SB w/ SIP68 Energy: $\rho=0.58$ NHP MR w/ SIP68 Energy: $\rho=0.46$ NHP PAC w/ SIP68 Energy: $\rho=0.43$ NHP SB w/ SIP68 Sleep: $\rho=0.37$</p> <p>Abbreviations:</p> <ul style="list-style-type: none"> - SA = Somatic Autonomy - MC = Motor Control - ES = Emotional Stability - SB = Social Behaviour - MR = Mobility Range - PAC = Psychologic al Autonomy 		

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		and Communica tion SIP scales & Upper extremity function $\rho=0.13-0.58$ SIP scales & Lower extremity function $\rho=-$ 0.07 to -0.33 SIP scales & Perceived health $\rho=-0.02-0.24$ SIP scales & Social warning $\rho=0.09-0.62$ SIP scales & Well- being $\rho=0.08-0.53$		
Post 1998b <i>(Predictors of Health Status...)</i> Cross-sectional study Community in Netherlands	318 SCI patients; avg. age=39.4; 75% men	Social functioning (path coefficient* = - 0.48), marital status (- 0.38), psychological functioning (-0.19), and age (-0.16) were significant predictors of life satisfaction (total $R^2=0.44$). Authors did not mention if the above		

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		negative correlations were expected. *Path coefficient in multiple regression are comparable to beta values, as calculated by LISREL statistical program																
<p>Post et al. 1996</p> <p>Cross-sectional, oral interviews</p> <p>Patient's homes</p>	<p>N=315; 75% male, avg. age = 39.4</p> <p>SCI injury patients between ages 18-65</p> <p>Complete tetraplegia: 21.7%</p> <p>Complete paraplegia: 29.2%</p> <p>Incomplete tetraplegia: 20.4%</p> <p>Incomplete paraplegia: 28.6%</p> <p>Mean time since injury = 3.6 years, SD 1.9</p>	<p>Spearman correlations:</p> <p>Inter-correlation between $\rho = 0.08-0.67$ on subscales. All correlations are low, except for correlation of "mobility range" with "social behavior" ($\rho = 0.67$). Correlations $\rho > 0.20$ (19) have $P < 0.001$.</p> <p>Barthel Index and SIP 68, $\rho = -0.74$, $P < .001$</p> <p>Life Satisfaction Questionnaire (LSQ or LISAT-9) and SIP-68, $\rho = -0.52$, $P < .001$</p>	<p>Internal Consistency:</p> <p>Cronbach's alpha = 0.92</p> <p>5 out of 6 subscales have good internal consistency 0.72-0.91; The subscale "emotional stability" was the only to lag behind (0.68); but still has 'moderately good' internal consistency.</p>	<p>Interpretability:</p> <table border="1" data-bbox="1537 787 1864 1365"> <thead> <tr> <th data-bbox="1537 787 1730 898">Subscale:</th> <th data-bbox="1734 787 1864 898">Mean (SD) score:</th> </tr> </thead> <tbody> <tr> <td data-bbox="1537 901 1730 971">Somatic autonomy</td> <td data-bbox="1734 901 1864 971">5.8 (4.8)</td> </tr> <tr> <td data-bbox="1537 972 1730 1042">Mobility control</td> <td data-bbox="1734 972 1864 1042">7.4 (2.4)</td> </tr> <tr> <td data-bbox="1537 1044 1730 1114">Mobility range</td> <td data-bbox="1734 1044 1864 1114">2.4 (2.4)</td> </tr> <tr> <td data-bbox="1537 1115 1730 1185">Social behavior</td> <td data-bbox="1734 1115 1864 1185">5.1 (3.1)</td> </tr> <tr> <td data-bbox="1537 1187 1730 1256">Emotional stability</td> <td data-bbox="1734 1187 1864 1256">1.0 (1.4)</td> </tr> <tr> <td data-bbox="1537 1258 1730 1328">Psychic autonomy &</td> <td data-bbox="1734 1258 1864 1328">1.1 (1.9)</td> </tr> </tbody> </table>	Subscale:	Mean (SD) score:	Somatic autonomy	5.8 (4.8)	Mobility control	7.4 (2.4)	Mobility range	2.4 (2.4)	Social behavior	5.1 (3.1)	Emotional stability	1.0 (1.4)	Psychic autonomy &	1.1 (1.9)
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		On Catell's salient similarity index, comparing proposed factor structure to obtained factor structure for all subscales, s values ranged from 0.37-0.95, showing good similarity.		communication	
				Total SIP68	22.8 (11.1)
Dallmeijer et al. 2001 Cross-sectional study Community in Netherlands	N=37 10 high tetraplegia 9 low tetraplegia 7 motor incomplete tetraplegia 11 paraplegia	Correlation between SIP68 and endurance capacity measures: SIP68 and VO2peak: r = -0.74 SIP68 and P0max: r = -0.68			
Nanda et al. 2003 Cross-sectional study	N=398, 119 with SCI 49% male Mean age (SD): 53.8 (18.2) years Retest: N=40, all with SCI 100% male	Correlation of SIP68 with: ADL: r = 0.44 IADL: r = 0.57 SIP: r = 0.94	Test-retest, Inter-rater, Intra-rater: Test-retest: ICC = 0.88	Floor/ceiling effect: Ceiling effects are observed for three SIP68 scales: Psychological autonomy and communication: 23.7%	

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Multiple communities in the US	Mean age (SD): 51.9 (13.0) years			Emotional stability: 53.6% Mobility range: 23.7%