Reviewer ID: Tyra Chu, Carlos L. Cano Herrera

Last updated: January 30th, 2024

Research Summary – Incontinence Quality of Life Questionnaire (I-QOL) – Quality of Life

Author Year Research Design Setting (country)	Demographics and Injury Characteristics of Sample	Validity	Reliability	Responsiveness Interpretability
Schurch et al. 2007 Randomized, double-blind, multicenter, placebo- controlled study 8 centers across France, Belgium, and Switzerland	N=59 (53 SCI, 6 MS) Mean age: 41.2 (range: 20-72 y) Mean duration of detrusor overactivity: 63 months (range: 3 months – 24 years) Participants with urinary incontinence due to neurogenic detrusor overactivity inadequately managed on oral anticholinergics	Item-to-scale correlations were similar for all items from all 3 domains: Avoidance and limiting behaviour: 0.45-0.61 Psychosocial impact: 0.48-0.78 Social embarrassment: 0.49-0.73 The only item that showed unacceptable (<0.40) item-to-scale correlations is the question "I worry about my incontinence getting worse as I get older" Pearson correlations: Correlations between Short Form-36 (SF-36)	Internal consistency: Internal consistency of I-QOL and its subscales (Cronbach's \alpha): Total score - 0.93 Avoidance and limiting behaviour - 0.85 Psychosocial impact - 0.89 Social embarrassment - 0.79	Responsiveness: The responsiveness of I-QOL score to improvements in symptoms was assessed by comparing I-QOL scores at week 6 for subjects grouped by the change from baseline in number of daily urinary incontinence episodes (25% increase, 25% decrease or no change). For all 4 I-QOL scores, mean change from baseline in I-QOL score was greatest for the "decreased" group, and lowest for the "increased" group in avoidance and limiting behavior,

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		and I-QOL scores at the end of the study (week 24) were substantial for most SF-36 domains and tended to be stronger and more likely to be significant than those at screening. Correlations with I-QOL scores at week 24 were strongest for mental health (.4559), social functioning (.4354), and vitality (.3654)		social embarrassment, and total domains. Floor/ceiling effect: There were no ceiling effects for any of the domains or for the total I-QOL score. Small floor effects were observed for the social embarrassment domain (8.9% of subjects had the lowest possible score) and the psychosocial impact domain (1.8% had the lowest possible score).
				Interpretability: MID (minimally important difference): The change in I-QOL score corresponding to an MID was approximately 4

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				points when defined as that corresponding to a small effect size (0.2 SD at baseline), approximately 11 point when defined as corresponding to a medium effect size (0.5 SD at baseline) and ranged from 8-11 when defined as the standard error of measurement.