



Workshop Abstract

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Assessing and promoting quality of life in Japan

Kousei Yoh MD

Orthop.Dept.Sasayama Hospital, Hyogo College of Medicine, Sasayama, Japan

Osteoporosis is one of the major factor for damaging the QOL of the elderly peoples.

Life is prolonged rapidly in Japan, and it is 85.6 years old in average longevity. It is the country which is the longest longevity in the world. Ratios older than 65 years old for population exceed 25% with a woman, and improvement of QOL in elderly peoples are demanded nationally. The QOL became evaluate in Europe and USA from the later half of 1980's. As for the QOL evaluation of a disease specific model in osteoporosis, Qualeffo41 by Lips et al (1997) of Europe and OPAC by Silverman et al (1993) of USA are well known in this fields. JOQOL (Japanese Osteoporosis Quality of Life) is made in Japan in 1999 by Takahashi et al and passes through a revised edition in 2000, and it is used now. In addition, as disease nonspecific model QOL evaluation, SF36, EQ-5D are used for QOL evaluation of the osteoporosis patient in Japan, too.

We reported QOL findings of 58 Japanese woman osteoporosis patients (73.1 average age \pm 8.4 years old) (JBMM23:167,2005). As for PCS (physical component summary score) 44.8 ± 11 , MCS (mental component summary score) 47.5 ± 10.1 were in Deviation values in SF36. As the number of the spinal compression fractures increased, PF (physical function), MH (mental health), GH (general health) deteriorated. As for JOQOL, there were significant correlation ($p < 0.01$) between SF36 with $r = 0.76$ and between EQ5D with $r = 0.80$.

Specially in the Japanese osteoporosis patient, a pain was strong, and depletion of a normal feeling with it was strong, but it was comparatively good on a SF (Social function) and a EM (emotional role). Same as a report of Silverman, we understood that increase of the number of the spinal compression fractures decreased in all domain of QOL, and it became clear that prevention of a fracture was effective in maintenance and improvement of QOL.

Big family doctrine is still maintained in countryside in Japan, and it is thought that a social function is maintained in the osteoporosis patients. A nuclear family advances in Japan, and, same as western society, a nuclear family is thought to be connected for degradation of a social function in the family for elderly persons. When we thought about maintenance and improvement of QOL in osteoporosis patients, prevention of a fracture by pharmacotherapy is the most important. And an elderly person does not stand alone from society and a family, and it seems that it is useful in maintenance of QOL to find a role among a family and society at the same time like in Japan and Asian country.