



## Health-related Quality of Life (HRQOL) – The Ultimate Health Outcome Measure

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Cindy Lam is Associate Professor and Head of the Family Medicine Unit, Department of Medicine, The University of Hong Kong. She graduated from The University of Hong Kong in 1981 with a MBBS degree and distinctions in physiology and pharmacology. She obtained the membership of the Royal College of General Practitioners with distinction in 1986, and was elected Fellow of the Royal College of General Practitioners in 1993. She is a Foundation Fellow of the Hong Kong Academy of Medicine (Family Medicine) and a specialist in family medicine.

Cindy's main research interest is health-related quality of life assessment, which was the topic of her MD thesis in 2003. She has adapted and validated several health-related quality of life measures including the SF-36 for application in the Chinese population in Hong Kong. She has published over 120 papers in peer-review journals. She is a member of the editorial board of several journals including *Family Practice*, *Medical Education*, the Chinese edition of *BMJ* and *Hong Kong Practitioner*.

An important goal of modern day medical care is to improve the quality of life (QOL) of people, which is the primary objective in the care of patients with incurable, chronic or functional diseases. HRQOL is becoming a standard outcome measure of the effects of illnesses, treatments and health services. Both NICE in the UK and the US Public Health Service Panel on Cost-effectiveness in Health and Medicine recommend that cost-effectiveness analyses should include HRQOL as one of the utility measures.

HRQOL is a latent construct, which poses particular challenge in its measurement. Based on the measurement theory, a latent construct can be measured if its related domains can be defined and quantifiable indicators of each domain can be identified. Research over the last three decades has defined the essential HRQOL domains and their indicators in both Western and Eastern cultures, and developed valid, reliable, and scientific methods of measuring this construct.

Hundreds of HRQOL measures are now available, and some of them have plenty of evidence on validity, reliability, sensitivity, responsiveness and clinical significance. Different HRQOL measures may have different purposes, target populations, conceptual base, scaling construct and scoring methods. Clinicians and researchers must first decide on whether and how HRQOL assessment can help their work, and then choose carefully the appropriate HRQOL measure that can serve the purpose.