ABSTRACT

BACKGROUND:
The impact of stroke on morbidity and mortality has been increasingly recognised in developing countries like Nigeria and paucity of data on health related quality of life of stroke survivors in our environment prompted this study. The study aimed at assessing the profile as well as global and domain specific health related quality of life of stroke survivors in AKTH as well as their determinants.

METHODS: The study was a hospital-based case-control study done over a period of 6 months (April 2014 to September 2014), in which 155 consecutive consenting patients with stroke (diagnosed using WHO criteria or brain CT Scan) attending the adult neurology clinic of AKTH who had satisfied the inclusion criteria and had suffered a stroke for at least one month, could communicate reliably or have a reliable proxy were recruited as the study population. An equal number (155) of age and sex matched healthy individuals drawn from apparently healthy hospital staffs as well as apparently healthy patients relatives who satisfied an inclusion criteria were recruited as controls. Their socio-demographic as well as their clinical characteristics were documented. Global as well as domain specific quality of life scores were determined (using HRQOLISP-40 questionnaire) and compared between the two groups. Determinant(s) of poor health related quality of life was sought among the many clinical and sociodemographic variables examined.

RESULTS: There were a total of 155 stroke survivors (comprising of 57 males and 98 females) and an equal number of age and sex-matched controls. The age of the stroke survivors ranges between 25-90yrs with a mean age (±SD) of 58.8(±13.3) years. While that of the controls ranges between 27-87 years with a mean ages (±SD) of 58.6 (±12.3) years.

The median duration of their stroke was 24 months. The mean modified Rankin score (mRS) was 3. The mean global HRQOL score was lower in stroke patients compared to that in the controls.
Aphasia, lesion location and post-stroke depression (PSD) were the independent predictors of poor global HRQOL. Independent predictors of poor QOL in physical domain were SLS and PSD whereas poor cognitive domain QOL was independently predicted by PSD and presence of cognitive impairment. Social support and PSD were the independent predictors of poor HRQOL in the spirit and spiritual interaction domain respectively.

**CONCLUSION:** The AKTH stroke survivors have moderately severe stroke and functional status. Their global as well as physical HRQOLs were worse than those of their apparently healthy individuals counterparts.

Aphasia, lesion location, cognitive impairment and post stroke depression were identified as the independent factors that negatively affect the HRQOL of stroke survivors.