ABSTRACT

The manifestation of heart failure results in varying degrees of functional capacity limitation, the severity of which plays a role in activities of daily living, and subsequently on the individual’s quality of life. Health related quality of life (HRQoL) has continued to grow in importance not only as a treatment end point in heart failure management and research, but also as a prognostic variable.

One hundred and six consecutive patients diagnosed with heart failure attending the outpatient clinic of University College Hospital, Ibadan were recruited to determine the relationship between HRQoL and functional status in patients with heart failure (HF). For each patient, echocardiography, six minute walk distance, NYHA class and HRQoL using the Minnesota Living with Heart Failure questionnaire® (MLHFQ) was recorded.

The mean age (SD) of the subjects was 56.8 (13.4) years with 41.6% of HF subjects having suboptimal HRQoL in varying degrees as assessed by the MLHFQ with a median score of 19. The MLHFQ was found to be reliable exhibiting high internal consistency (Cronbach’s alpha reliability coefficient - 0.928), similarly high for each of the subscale domains (Cronbach’s alpha: 0.801 - 0.931). There was a significant relationship between the MLHFQ and the NYHA class (rho: 0.7706; p<0.001) and six minute walk test (rho: -0.3986; p<0.001; more with physical subdomain (rho: -0.484; p<0.001), a finding that also validates the MLHFQ. The LVEF and FS (LV systolic function measures) also showed significant association with the physical (rho: -0.252; p<0.05), overall (rho: -0.332; p<0.01) and global MLHFQ scores (rho: -0.235; p<0.05). Other factors
(reduced pulse pressure, presence of crepitation, oedema, distended neck veins and raised JVP) were also associated with a poor quality of life (p<0.05).

The evaluation of HRQoL with MLHFQ in HF subjects is a reliable and valid assessment with significant clinical utility and it could be employed in routine practice and research evaluation in addition to NYHA functional classification, six minute walk test and left ventricular systolic function evaluation.