Quality of Life in Head & Neck Cancer
8th International Conference

Thursday 8th November

Afternoon

13:30
Keynote speaker, Dr Joanne Patterson
Swallowing Outcomes In Head & Neck Cancer

14:30
Free papers
Diane Goff: Pre Treatment Information Regarding Dysphagia - Exploring The Views of Head & Neck Cancer Patients
Sam Harding: The Impact of Disfigurement Following Treatment for Head & Neck Cancer
Sobia Bilal: Cross Cultural Adaptation of the Facit H&N v.4.0 in Urdu Language for a Pakistani Clinical Setting
Professor Hans Aarstad: Distress Scores Predict Uniquely Subsequent Survival in Successfully treated Head & Neck Cancer Patients – A Prospective Study

15:30
Refreshments

16:00
Free papers
Emma Hogg: “What will I Be like?” – Patient Reported Health Related Quality of Life Outcomes Following Head & Neck Cancer Treatments.
Yeur-Hur Lai: Examine Head & Neck Cancer Patients Neck and Extremities Muscle Functions, Mouth Opening and Speaking Ability – Are these factors related to patients employment status?
Aileen Timmons: Post-treatment Support Needs of Survivors of Head & Neck Cancer – View and Experiences of Survivors and Health Professionals
Sami Moubayed: Tumour p16 Status Does Not Influence the Quality of Life and Depression Outcomes in Oral and Oropharyngeal Squamous Cell Carcinoma
Cherith Semple: Plans to transform a head and neck cancer clinic in South Easter HSC (Belfast)

17:15
Discussion and Close

18:00 – 19:00
Informal Survivorship, North of England Psychology Meeting – Taking place in the bar area

19:00
Course Dinner, Blakes Restaurant, Hard Days Night Hotel
Title: CROSS-CULTURAL ADAPTATION OF THE FACIT-H&N v.4.0 IN URDU LANGUAGE FOR A PAKISTANI CLINICAL SETTING.

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Background:
Quality of life (QOL) measures have now become an essential part of health outcomes. In the last decade there has been an increasing awareness about QOL of cancer survivors in developing countries.

Aim:
The study aimed to achieve cross-cultural adaptation of the FACIT-H&N (v 4.0) in Urdu language for the Pakistani head and neck cancer patients.

Methods:
In this study the 'same language adaptation method' was used. Cognitive debriefing through in-depth interviews of 25 Pakistani H&N cancer patients for the purpose of assessing semantic, operational and conceptual equivalence was carried out. The validation phase included 50 patients to evaluate internal consistency (Cronbach's alpha), convergent and discriminant validity, known group validity and dimensionality through factor analysis.

Results:
The translated FACIT-H&N (v4) was found to be easy to understand (100%). A few minor disparagements were noted and adjusted accordingly. A set of nine Pakistani questions was extracted and pilot tested along with FACIT-H&N on 50 patients, mostly aged 46-60 years (44%) and predominantly males (68.0%). Mostly, oral cavity tumors (68.0%) with a high proportion of late stage presentation (68.0%) were noted. Cronbach's alpha for FACIT-G subscales ranged from 0.726 - 0.969. The head and neck subscale and Pakistani questions subscale showed low internal consistency (0.426 and 0.541 respectively). All the FACIT summary scores and most of subscales demonstrated known-group validity in differentiating patients of different clinical stages, treatment status and tumor sites (p<0.05). Most FACIT summary scales correlated strongly with each other (>0.75) and showed convergent validity (>0.90), with little discriminant validity. Factor analysis on the 48 items revealed 6 factors, analysis explained 85.173% of the total variance. The Kaiser-Meyer-Olkin measure of sampling was very good (>0.8) with Bartlett's Test of Sphericity highly significant (p<0.001) for all the subscales.

Conclusions:
The cross-culturally adapted FACIT-H&N into Urdu language showed adequate reliability and validity to be incorporated in Pakistani clinical setting for head and neck cancer patients.