

NHS BLOOD AND TRANSPLANT

BOWEL ADVISORY GROUP

Preliminary Oxford data on Quality of life related to Intestinal transplantation

Pt	Pre				Post		
	SF36				SF36		
	PCS	MCS	EQ5D		PCS	MCS	EQ5D post
[1]	23.4	45.1			29	52.9	65
[2]	44.9	37.4					
[3]					39.9	57	75
[4]					25.1	34.6	30
[5]	15.3	39	10		33.5	41.1	80
[6]							80
[7]					58.5	51.3	85-90
[8]	17.3	35	30				85
[9]	24.2	27.4	25		39.6	52.9	79.5
[10]	54.5	50.2			58.5	51.3	90
[11]			70				
[12]			10				

PCS: Physical component summary; MCS: mental component summary

This preliminary collection of data shows:

1. It is practical to collect such data
2. There is a difference pre-and post (although the timing post varied between 6 and 18m)
3. the very poor quality of life (measured either by SF36 or EQ5D) pre-transplant, with the exception of [10] who was living normally without HPN prior to transplantation for his carcinoid
4. Either instrument is able to detect a change (although notable difference between the limited change in SF36 for [5], despite large change in EQ5D)
5. Post-transplant QoL is generally excellent (EQ5D)
6. The Mental (MCS) component appears to change more than the physical (PCS)

Conclusions

Collecting such data should continue with more attention to formalising the intervals for data collection. Data from Cambridge are pending. It may yet provide a useful snapshot on the value and impact of intestinal transplantation. In Oxford we are collecting these data on our HPN patients, who (of course!) differ and are not matched to the transplant population.

Simon Travis
Oxford
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