Quality of life assessment in a recent haemoglobin trial in CKD (CHOIR)

Sir,

We read with interest the editorial comment by Levin [1] on methods and lessons learned from recent haemoglobin trials in chronic kidney disease (CKD). Levin identifies a number of issues on the design, reporting and conclusions of one of these trials, the Correction of Haemoglobin and Outcomes in Renal Insufficiency (CHOIR) study, published in the New England Journal of Medicine [2]. Improvement in quality of life (QOL) is an anticipated benefit of correcting anaemia, but in the CHOIR study there were no differences in QOL in the high Hgb group, in contrast to any other study to date [1]. Levin notes that it is not clear when QOL was measured in the CHOIR study [1], and we noted additional issues.

One measure used in the CHOIR study to assess QOL was a disease-specific instrument, the Kidney Disease Questionnaire (KDQ). Unfortunately, the correct reference was a disease-specific instrument, the Kidney Disease Questionnaire (KDQ). Unfortunately, the correct reference for the KDQ, developed by Laupacis et al. [3], was not provided. The purpose of the KDQ is to assess five distinct QOL domains found to be salient for CKD patients: physical symptoms, fatigue, depression, relationships with others and frustration. Instead of reporting results for each of the five KDQ domains, however, a ‘KDQ total score’ was reported for CHOIR participants (Table 2) [2]. In the absence of a well-validated composite score, summing across discrete domains of a QOL measure is meaningless. Moreover, important information on QOL differences among patients participating in the CHOIR study may have been obscured. Change may occur in some domains but not in others, as Foley et al. [4] showed when they used the KDQ in their study of the normalization of Hgb in haemodialysis patients. Continued study of Hgb targets, epoetin alfa use and associated clinical outcomes among CKD patients is important [1], and QOL perceptions, appropriately measured and analysed, can furnish valuable information.

Conflict of interest statement. None declared.

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