

What is this research about?

This publication describes the development of a measurement scale for assessing quality of life in people with bipolar disorder. The scale was developed by Drs. Michalak and Murray in order to provide a richer understanding of outcomes in people with bipolar disorder. Called the 'Quality of Life in Bipolar Disorder' or QoL.BD, it is the first questionnaire produced to specifically measure quality of life in people with bipolar disorder.

What did the researchers do?

The researchers undertook a thorough, four-year program of research. First, they carried out 52 interviews with people with bipolar disorder, their family members and international experts in bipolar disorder treatment and research. They then went through a series of further stages (statistical testing and additional consultation with people with bipolar disorder) to develop two versions of the QoL.BD scale, a brief version with 12 questions and a full version with 56 questions. The full version assesses quality of life in 14 areas: Physical health, Sleep, Mood, Cognition, Leisure, Social life, Spirituality, Finances, Household, Self-Esteem, Independence, Identity, Work (if the person is working) and Education (if the person is in school or college). The brief version of the scale takes a minute or so to complete, the longer version takes most people less than 5 minutes.

What did the researchers find?

The research produced a quality of life scale that is specific for people with bipolar disorder. A number of the areas of quality of life measured in the QoL.BD, such as physical health and mood, are assessed in most available quality of life scales. Some of the areas assessed by the QoL.BD are likely, however, to be particularly important to people with bipolar disorder (such as sleep) or are not often assessed in people with bipolar disorder (such as spirituality and self-esteem). The researchers piloted the QoL.BD and found it to have good properties. For example, it was found to be **valid**, which means that it is real-world, and accurately captures quality of life in people with bipolar disorder.

What do you need to know?

The management of bipolar disorder is traditionally measured by looking at a person's levels of symptoms, or how often they fall back (relapse) into episodes of depression or mania. Although useful, these kinds of measurement do not necessarily take into account an individual's culture, value systems, goals, expectations, standards and concerns. In addition, bipolar disorder may affect quality of life in specific ways compared to other kinds of mental health conditions.

A condition-specific measure of quality of life could be useful for both people living with bipolar disorder and their healthcare providers in terms of assessing treatment and recovery goals.



What did the researchers find (continued)?

The QoL.BD was also found to be **reliable**, which means that it is consistent and performed as the researchers expected under different testing conditions. Perhaps most importantly, the QoL.BD was able to pick up changes in a person's clinical state (specifically, changes in their levels of depression) – this shows that the scale is also **responsive**. The researchers examined how responsive the QoL.BD was compared to other existing quality of life scales that are not specific for bipolar disorder, and found that it was better able to detect change than the non-specific scales. Although comprehensive, this research represents just the first stage of a larger program of research. The next step is to recruit a new, larger (over 200 people) sample of people with bipolar disorder to complete the full version of the QoL.BD. This will allow the researchers to confirm the **structure** underpinning quality of life in people with bipolar disorder. However, the QoL.BD scale represents a promising step towards a new paradigm in bipolar disorders research, where more emphasis is being placed on the person living with bipolar disorder and their life as a whole.

How can this research be used?

The researchers are keen to see the QoL.BD scale, which is open-access and in the public domain, undergo further testing in research and clinical settings. The scale has already been incorporated into several clinical trials of psychological and medical treatments for bipolar disorder. It is also appropriate for use in clinical settings. The researchers have developed a number of [training videos](#) to help healthcare providers who work with people with bipolar disorder to use the QoL.BD in clinical settings.

Key Words

Quality of life, assessment scale, measure, bipolar research

Further Reading

*Michalak EE, Murray G & CREST.BD (2010). Development of the QoL.BD: a disorder specific scale to assess quality of life in bipolar disorder. *Bipolar Disorders* 12(7):727-40.

Murray G & Michalak EE (2012). The quality of life construct in bipolar disorder research and practice: past, present, and possible futures. *Bipolar Disorders* 14(8):793-6.

Victor SE, Johnson SL & Gotlib IH (2011). Quality of life and impulsivity in bipolar disorder. *Bipolar Disorders* 13(3):303-309.

Michalak EE, Yatham LN, Kolesar S & Lam RW (2006). Bipolar disorder and quality of life: a patient-centered perspective. *Quality of Life Research* 15(1): 25-37.

*Bipolar Current based on this original scientific publication

Learn more about how CREST.BD researchers are changing the landscape of bipolar disorders



WWW.CRESTBD.CA



[@CREST_BD](https://twitter.com/CREST_BD)



[CRESTBDBipolarResearch](https://www.facebook.com/CRESTBDBipolarResearch)



[CRESTBD](https://www.youtube.com/CRESTBD)

With thanks to author Arif Jinha in collaboration with Drs. Greg Murray and Erin Michalak | The Bipolar Current template has been adapted from: ResearchImpact (2010). "ResearchSnapshots": <http://www.researchimpact.ca/researchsearch/>