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The German Version of the Child Perceptions Questionnaire -Association to Overall Well-Being

IP

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Introduction

Measures which address oral-health-related quality of life (OHRQoL) are being used with increasing frequency in oral health surveys and clinical trials in dentistry. They document the functional and psychosocial outcomes of oral disorders and are intended to supplement clinical indicators to provide a comprehensive account of the health of individuals and populations. Until recently, children's oral health-related quality of life was measured using parents as informants. Instruments have now been developed, which have demonstrated that with appropriate questionnaire techniques, valid and reliable information can be obtained from children (1). The Child Perceptions Questionnaire 11-14 (CPQ11-14) is an OHRQoL-instrument that assesses the impact of oral conditions on the quality of life of children and adolescents. Jokovic et al. presented this age-specific OHRQoL-instrument, and found it to be valid for a clinical sample of 11-14-year-old Canadian children (2).

Objectives

The aim of the present study was to examine the validity of the German version of the Child Perceptions Questionnaire (CPQ-G11-14) by exploring the association between oral health related quality of life (OHRQoL) with the overall well-being in a random population sample of 11- to 14-year-old children in Germany.

Material and Methods

1589 children were drawn from a nation-wide sample considering the size of the selected communities. The children completed the German version of the CPQ11-14 questionnaire consisting of 50 questions about oral problems with 5 options for responding (the problem can occur: very often, often, sometimes, hardly often, never). Additionally, the children were interviewed for their overall well-being, which was measured using a 5-point scale ranging from 1 (excellent general health) to 5 (very bad general health). Statistical analysis (ANOVA) was performed to test the differences of CPQ11-14 summary score between the different groups using SPSS 16.0.

Results

Following mean CPQ-G scores were evaluated within the different overall well-being groups: score 1 (excellent): 7.1 (\pm 7.5), score 2 (good): 9.0 (\pm 7.7), score 3 (moderate): 11.9 (\pm 10.1), score 4 (bad): 18.5 (\pm 15.6), score 5 (very bad): 20.5 (\pm 20.5). ANOVA revealed significant differences between the groups (p < 0.001).

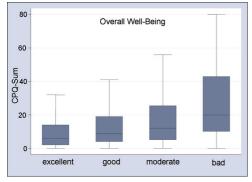


Figure 1: Boxplot of the results

Conclusions

Self-report of impaired well-being is linearly associated with impaired oral health related quality of life in children using the CPQ-G. The results support the validity of the CPQ-G as an instrument to measure OHRQoL in 11-14-year-old German children.

Literature

- 1. Barbosa TS, Gaviao MBD: Oral health-related quality of life in children: Part I. How well do children know themselves? A systematic review. Int J Dent Hygiene 2008
- 2. Jokovic A, Locker D, Stephens M, Kenny D, Tompson B, and Guyatt G: Validity and reliability of a questionnaire for measuring child oral health-related quality of life. J Dent Res 2002

The study was supported by GABA International.

Abbreviations

OHRQoL = Oral health-related quality of life CPQ = Child Perceptions Questionnaire

This Poster was submitted by Dr. Katrin Bekes.

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Introduction

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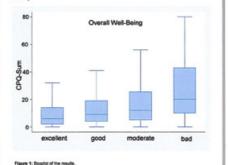
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score 1 (excellent): 7.1 (+/- 7.5), score 2 (good): 9.0 (+/- 7.7), score 3 (moderate): 11.9 (+/- 10.1), score 4 (bad): 18.5 (+/- 15.6), score 5 (very bad): 20.5 (+/- 20.5).

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References

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