



International Society for Quality of Life Research

Volume 6 Issue 1

Newsletter for ISOQOL Members

March 2001

PRESIDENT'S MESSAGE

Dr. Ivan Barofsky
Baltimore, MD (USA)

“Health-related Quality of Life (HRQL) is the ultimate outcome of health care.”

This statement represents ISOQOL's vision statement, and is meant to set a direction and purpose to our activities. But how do we make HRQL the ultimate outcome of healthcare and what do we mean by ultimate? Do we mean that the quality of a person's life is more important than the length of his or her life?

When the Board was discussing the use of the word “**ultimate**” it was clear that the clinicians among us were very uncomfortable stating that the quality of a person's life was more important than the length of the person's life. They would justifiably ask, “how can you have quality in the absence of survival?” I have no simple answer for this question except that I know that this is not just an academic question. As I get older the question becomes increasingly real to me—these are issues that I, as well as you, will have to ponder as well. I also know that I have considered them for others (family members, colleagues, and, of course, patients), but recognize that when you consider them for yourself it will become quite different.

I also marvel that I am part of an organization that has as its focus such profound philosophical issues. Yes, we use science as our tool and we use this tool with great precision and accomplishment. But sometimes I feel that we get so lost in the mechanics of applying these tools that we lose sight

of the broader implications of our activities. For this reason, I believe we should periodically ask ourselves whether our activities are in fact contributing to the larger goal of making HRQL the ultimate outcome of healthcare. To operationalize this goal I would propose to you that we make “**Optimizing a Person's HRQL: The Agenda for the Next Millennium.**”

What does this phrase mean and how do we achieve this goal? First, I hope you see that in this phrase I have also given you part of my answer to resolving the dilemma created when you put quality versus the duration of life. It shouldn't be an either/or proposition, but rather how to find the balance between these extremes, and one element of this would be optimizing the person's HRQL.

What do I mean by optimizing a person's quality of life? Does it mean that we do what ever we can to minimize the adverse impact of a person's disease and treatment? Does it mean that makes people happy? If our interventions enhance the well being of patients; is that our goal? My answer to each of these questions would be yes.

The phrase “optimizing a person's HRQL” implies that I am proposing that we ultimately make an individual patient's preferences the focus of our healthcare policies but also our assessment objectives. I believe the field is developing the tools to achieve this goal. Item response theory is permitting greater flexibility in questionnaire construction, and the rising appreciation of the role of cognitive processes and cross-cultural issues will provide insights into questionnaire design as well. What we need to do now is to keep

ourselves focused by periodically asking ourselves why we are doing what we are doing.

I would welcome your thoughts on these issues. Please send your e-mail to: ibarofsk@welchlink.welch.jhu.edu.

New ISOQOL Bylaws Approved

Thanks for sending in your vote. There was an overwhelming response and the Bylaws were approved.

ISOQOL Pan-Pacific Conference April 13-15, 2001 Tokyo, Japan

*Join colleagues for a HRQL
Conference in Japan.*

- March 20, 2001 ~ Early registration deadline

Link to more information through the ISOQOL website at www.isoqol.org.



The ISOQOL Newsletter is published three times a year by the International Society for Quality of Life Research with the cooperation of Degnon Associates.

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8th ANNUAL ISOQOL RESEARCH CONFERENCE ~ November 7-10, 2001

*Neil Aaronson, PhD and
Mirjam Sprangers, PhD
Co-Chairs, 8th Annual Conference
Amsterdam, The Netherlands*

On behalf of the International Society for Quality of Life Research (ISOQOL), it is our pleasure to invite you to attend the 8th Annual Conference that will be held in Amsterdam, the Netherlands on November 7-10, 2001.

This year's meeting will have four themes: "HRQL in Daily Clinical Practice," "HRQL and Mental Health," "Psychosocial Modeling of HRQL Outcomes," and "HRQL, Happiness and Social Indicators Research." The program will include, for each theme, two plenary lectures by distinguished colleagues in the field. These state-of-the-art lectures will hopefully serve as a catalyst for lively discussions of these and other topical issues during the course of the meeting.

The success of the meeting will, as always, depend largely on the active participation and contribution of HRQL researchers representing a broad spectrum of professional disciplines. We encourage you to submit abstracts of your best and most recent work, and to plan ahead for your participation in Amsterdam. As in previous years, proffered papers will be presented in both parallel oral sessions and in poster (discussion) sessions, and there will be opportunities to meet with various experts during early morning sessions. Additionally, this year we are organizing, for the first time, four special, multi-speaker sessions around the themes: "Clinical Significance of HRQL Outcomes," "HRQL in Ethnic Minority Cancer Populations," "HRQL and the Cognitive Sciences," and "Summary Measures of Population Health." These sessions will combine brief presentations with ample opportunity for audience discussion. On the final day of the meeting, intensive workshops will

be held covering a range of conceptual and methodological topics.

Amsterdam is a beautiful, historical and vibrant city, combining Old World charm with a contemporary pulse. We look forward to welcoming you to a productive professional meeting and, we hope, an enriching personal experience. See you in November.

PRESIDENT'S AWARD: CALL FOR NOMINATIONS

*Sharon Wood-Dauphinee, PhD
Past President
Montreal, Quebec (Canada)*

ISOQOL'S Board of Directors has established a President's Award. The goal of this Award is to recognize outstanding contributions to the advancement of the quality of life field in one or more of the following areas: "education of professionals, patients or lay individuals about the value of quality of life assessment as related to health"; "promotion or execution of quality of life research or other scholarly activities"; and "facilitating or furthering policy initiatives that impact upon health-related quality of life."

Individuals who excel in one or more of the designated areas may be nominated by a colleague, student or friend. The nomination package should include:

- (1) A letter from the nominator specifying the nominee's contributions;
- (2) The curriculum vitae of the nominee;
- (3) An external supporting letter.

The nomination package should be sent **by June 30, 2001** to: **Dr. Ivan Barofsky, President; ISOQOL Executive Office, 6728 Old McLean Village Drive, McLean, VA 22101-3906, USA.**

The awardee will be selected by the ISOQOL Executive Committee and approved by the Board of Directors. The award will consist of a plaque, a \$1000 honorarium, and up to \$1000 in travel expenses if the recipient chooses to attend the Annual Conference. This year's meeting will be held in Amsterdam, November 7-10. The recipient does not have to be present to receive the Award.

EDUCATION COMMITTEE OUTLINES PLANS FOR FUTURE DIRECTION

*Rick Berzon, DrPH
Chairman, Education Committee
Killingworth, Connecticut (USA)*

Quite a number of people have expressed an interest in volunteering with ISOQOL's Education Committee, and it is my intention to involve as many of you as possible with it. Whether to divide the full committee into subcommittees, each with its own subcommittee chairperson, is under discussion. This approach may make sense from both an efficiency and practical perspective.

We have numerous issues to take up this year. First, policies need to be drafted to address specific issues; these include, for example, defining the circumstances under which ISOQOL will endorse outside conferences, workshops and meetings, and identifying a specific process to disseminate scholarship support for international meetings.

Second, the Education Committee needs to identify state-of-the-art, cutting edge issues and topics that ISOQOL should take the lead on this year. Clinical significance of HRQL Outcomes, for example, seems to have taken center stage. Should ISOQOL identify other, equally important directions for members and, if so, which ones? Through what venue should topics be addressed: specific meetings, annual conferences, additional workshops, etc.?

Third, ISOQOL needs to consider the location of future workshops and conferences. Specifically, there are areas of the world in which ISOQOL might consider holding different types of gatherings. We need to balance outreach with fiscal responsibility, but in some cases and for some locations, should one be given greater weight than the other?

If you have any additional questions, contact Rick Berzon at rberzon@rdg.boehringer-ingenelheim.com. Those who expressed an interest in becoming involved with the Education Committee will be contacted in the near future, so get ready!

USA CENTERS FOR DISEASE CONTROL AND PREVENTION RELEASES NEW HRQL REPORT AND WEBSITE

*David Moriarty, BSEE
Atlanta, Georgia (USA)*

The Centers for Disease Control and Prevention (CDC) technical report "Measuring Healthy Days: Population Assessment of Health-Related Quality of Life" is now available. This 40-page report is intended for public health professionals and others interested in HRQL measurement.

The report describes the validity and use of the Healthy Days HRQL survey measures developed by CDC and partners. From 1993 through 2000, more than one million adults were asked a standard set of four Healthy Days questions on the state-based Behavioral Risk Factor Surveillance System (BRFSS). These questions measure self-rated health and recent physical health, mental health, and activity limitation. Several other surveys in the USA and other countries are now using this brief four-item set to provide comparability on key HRQL domains across studies.

Nearly half of USA states are also now using an expanded set of HRQL measures that ask additional questions about activity limitation, recent pain, depression, anxiety, sleeplessness, and vitality.

A PDF copy of the report is available on a new CDC World Wide Web site on HRQL surveillance at: <http://www.cdc.gov/nccdphp/hrqol>. The Web site includes key findings related to HRQL and links to community, state, and private organizations that have used the

Healthy Days measures for population health assessment and policy development.

For additional help in using the Healthy Days measures, please contact Rosemarie Kobau, CDC Division of Adult and Community Health, 4770 Buford Highway, NE, Mailstop K-45, Atlanta, Georgia, 30341, or e-mail to RKobau@cdc.gov.

ISOQOL INTRODUCES A NEW MEMBER CATEGORY: INSTITUTIONAL MEMBERSHIP

ISOQOL has recently developed a new membership category: "Institutional Membership." Available to universities, institutions, and private companies, Institutional Membership will boost ISOQOL activities and programs while at the same time benefiting the organizations that become members.

The International Society for Quality of Life Research (ISOQOL) was organized to encourage scientific research and methodological development in health-related quality of life and other patient outcome measures. The society accomplishes this overall goal with international scientific meetings, educational training workshops, and other activities.

ISOQOL enjoyed quite a successful year in 2000 by welcoming many new members, and our annual meeting in Vancouver was one of the largest in the past few years. One goal of the society is to focus more on health policy issues and the incorporation of health-related quality of life outcomes in the evaluation of healthcare interventions, while monitoring the health of populations. Through the addition of Institutional Members, it is hoped that the Society can further achieve this goal.

**If you have a colleague
that would be interested in
joining the Society, please
have him/her contact the Executive
Office at info@isoqol.org**

GUEST COLUMN: NEW DIRECTIONS IN HRQL RESEARCH

*Dr. Madeleine King, BSc
Sydney, Australia*

Editor's Note: *With its roots firmly based in psychosocial, psychometric, and statistical research, the field of quality of life has expanded during the past decades. In this column, quality of life researchers are invited to give their personal views on how the field would further mature. While this is an invitational column, readers with strong views, either supporting or contradicting the opinions voiced by the columnist, are encouraged to react.*

Many aspects of HRQL assessment are challenging—Carolyn Schwartz and Rick Berzon have already outlined several, and many more will be covered by subsequent contributors. My mission is to achieve some consolidation of HRQL research efforts so that we make better use of the methods we have so painstakingly developed. At the moment, HRQL research is highly fractured and in need of some coordination.

A lot of the HRQL research effort to date has gone into developing valid instruments. The large number of instruments available makes it difficult to accumulate evidence about HRQL across studies that have used different instruments. There is often more than one instrument designed for a particular purpose, yet there has been little investigation of the comparability of such candidates as indicators of the unobservable (latent) phenomena of interest (“true” HRQL). We need to know how the knowledge we derive from HRQL assessment is conditioned by the particular instrument(s) we use.

I am not arguing against the wide range of HRQL instruments that are available. We know that the HRQL instrument chosen for a particular application should suit the substantive questions, context and constraints of the research application. When a valid and suitable instrument is used in an appropriately

designed study and the implications of the observed HRQL effects are understood, then inferences from the study should be valid. Validity, reliability, responsiveness and interpretability of the HRQL instrument contribute to the internal validity of inferences from an applied HRQL study. A further attribute is required for external validity: *generalizability*. Would we have reached the same conclusions about the effects of treatment on HRQL if we had used an alternative “suitable” instrument? If we want HRQL research to inform evidence-based medicine, then we need a research agenda that addresses the comparability of alternative instruments.

Before tackling interpretation across instruments, we must be able to interpret individual instruments. The interpretation of HRQL scores has received increasing attention over the past five years. Various approaches are being developed and applied. The elusive concept of “minimum clinically important difference” is hotly contested. Yet few instruments currently have comprehensive evidence readily available for interpreting their scores, making most interpretation a somewhat *ad hoc* affair. A further complication is the ongoing evolution of instruments as their performance in particular contexts is fine-tuned (eg, SF-36 standard and acute versions). We need to pursue comprehensive guidelines for the interpretation of all the dominant HRQL instruments, including large-sample normative, “known-group” and “known-treatment” data.

There must be a way to establish the comparability of HRQL instruments. HRQL scores produced by two or more instruments may be assessed for comparability if the instruments are used concurrently. Almost all comparisons to date have comprised estimates of correlation using cross-sectional data. This tells us very little about whether two instruments would yield the same inferences in a given setting. Nor does it address the longitudinal performance of instruments—a serious shortcoming

given that applied HRQL research is almost always longitudinal. We need more informative comparisons, addressing aspects of the longitudinal performance of instruments (eg, responsiveness), using sound statistical methods, and linked to interpretations of mean scores and differences.

We know there is a lot of variation in HRQL data, both between individuals and within individuals over time. There are two ways of looking at this, and both deserve further research. In the first, variation is interesting. What is driving it? We know that some is due to disease and treatment, age and gender, but much variation remains unexplained. Is it due to innate personal characteristics? Or behavior that can be modified? Such knowledge may be used to improve patient outcomes and cost-effectiveness by targeting interventions at those individuals who will benefit most.

The second view treats the variation as “noise.” Regardless of whether it is instrument-related measurement error, or it reflects “real” noisy variations in HRQL, in statistical analysis it obscures the “signal” we are looking for (eg, treatment effect). Summary measures may be a way to reduce this noise. Longitudinal HRQL data may be summarized across time and across dimensions of HRQL. This may also facilitate interpretation, and perhaps even generalizability.

On occasion, it is wise to stop travelling and take a look around. Before ploughing on into the unknown, let us ask the obvious questions: Where do we want and need to go? Who is driving? Who is navigating? Has anyone got a map? We will hear of answers and sketchy maps in this column in the newsletters to come. In the meantime, *bon voyage*.

**To share your reaction to
this column, please contact
the Newsletter Editor at
m.a.sprangers@amc.uva.nl**

**ISOQOL WELCOMES
NEW MEMBERS SINCE
OCTOBER 31, 2000**

Mikayo Ando MA, MS

Johns Hopkins University
Rockville MD

Benoit Arnould

MAPI Values, Lyon France

Maria Berend Dipl, Psyc

University Kiel
Schleswig-Holstein Germany

Jane Blazeby MD

Dept. of Surgery, Bristol University
Bristol, Avon UK

Johanna Bosch PhD

Decision & Technology Assessment
Group
Boston MA

Ismail Budhiarso MA

Health Research Associates, Inc.
Seattle WA

Steven Burch PhD, BSPHarm

Strategic Outcomes Services, Inc.
Research Triangle Park NC

Douglas Chepeha

University of Michigan, Ann Arbor MI

David Close MD

Joe Arrington Cancer Center
Lubbock TX

Marisue Cody PhD

University of Arkansas for
Medical Sciences
Little Rock AR

Thierry Conroy

PR Centre Alexis Vautrin
Vandouze-les-Nancy France

Sheri Dodd MSc

Janssen Pharmaceutica, Titusville NJ

Leon Dupclay, Jr. PhD

Aventis Pharmaceuticals, Parsippany NJ

Peter Franks PhD

Centre for Res. & Implementation of
Clinical Practices
London UK

Marlene Frost HRN, PhD

Mayo Clinic Women's Cancer Program
Rochester MN

Maren Glveer

University Hospital of Kiel
Hamburg Germany

Joseph Green

University of Tokyo, Tokyo Japan

Harry Guess MD, PhD

Merck Research Laboratories
Blue Bell PA

Bphaarm Hamel Line, Bsc, MSc

Galderma Laboratories

La Defense France

Timothy Hunt PhD

Pharmacia Corp., Peapack NJ

Mitsuhiko Kamei MD

Kamei Clinic Nagoya, Aichi Japan

Tessa Kennedy-Martin BA

Eli Lilly Windlesham, Surrey UK

Margaret Keresteci

Innovus Research Inc.

Burlington ON Canada

Ronette Kolotkin PhD

Quality of Life Research, Durham NC

Paul Krabbe FM PhD

University Medical Centre Nijmegen

Nijmegen The Netherlands

Miriam Kuppermann PhD

UCSF Dept. of OB/GYN & RS

San Francisco CA

Michael Leahy MBA

Aventis Pharmaceuticals

Parsippany NJ

Astra Liepa PharmD

Eli Lilly & Company, Indianapolis IN

Hester Loonen MD

Academic Medical Centre

Amsterdam The Netherlands

Easa Mansoori BS, MOH

AbuDhabi UAE

Christopher Mast PhD

Merck Research Laboratories

West Point PA

Taketoshi Matsumoto MD

National Cancer Center Hospital

East Kashiwa, Chiba Japan

Betsy Miller MS, Phm

Pharmacia & Upjohn, Inc.

Mississauga ON Canada

Scott Millis PhD

Kessler Medical Rehab Research Corp.

West Orange NJ

Avani Modi BS

University of Florida, Gainesville FL

Tomoko Morimoto MSc

Hiroshima International University

Kurose-cho, Kamo-Gun Japan

Takeo Nakayama MD, PhD

Kyoto University School of Public Health

Kyoto City, Kyoto Japan

Mina Nishimori MD

University of Tokyo, Tokyo Japan

Les Noe MPA

Ovation Research Group

Highland Park IL

Annoesjka Novak MSc NV

Organon Oss The Netherlands

Ann O'Mara PhD

National Cancer Institute, Rockville MD

Hideki Origasa PhD

Toyama Medical and Pharmaceutical
University, Toyama Japan

Marcie Parker PhD

Optum, Golden Valley MN

Amy Perwien PhD

University of Florida, Dept. of Clinical
and Health Psych, Gainesville FL

Zoran Potic BSE

Institute of CVD Sr.

Kamenica, Yugoslavia

Nick Poullos PhD

Roche Labs, Nutley NJ

Ron Preblich PharmD

Aventis Pharmaceuticals, Parsippany NJ

M.L. Schok MSc

Veterans Institute, Centre for Strategy,
Research & Expertise

Doorn AC The Netherlands

Olga Sheinina BA

CPR Institute, St. Petersburg Russia

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Alan Williams BCom

University of York, York UK

Naoyuki Yoshida MD

Japan Anti-Tuberculosis Association

Tokyo Japan

Thomas Yuran PharmD

Bayer Corporation, West Haven CT

Benny Zee PhD

Clinical Trials Group

Kingston ON Canada

MEMBER NEWS

Editor's Note: This column about ISOQOL members will appear as often as there is news worthy of note. Members are encouraged to submit information about new positions, awards, assignments, and memberships of themselves and/or their colleagues.

Neeraj K. Arora PhD (USA) recently received a doctoral degree from the University of Wisconsin-Madison and has joined the Outcomes Research Branch of the National Cancer Institute in Bethesda, MD as a health services researcher. Dr. Arora is conducting research on health related quality of life and satisfaction issues in cancer care.

Carola Bardage MSc (Pharm) PhD (Sweden), of the Dept. of Pharmacy, Div. of Pharmaceutical Services Research, BMC received a doctoral degree in November last year on a work entitled "Cardiovascular Disease and Hypertension: Population-based Studies on Self-rated Health and HRQL in Sweden."

Francois Bethoux MD (USA) has been promoted Clinical Associate at the Mellen Center for Multiple Sclerosis Treatment and Research—Cleveland, OH Clinic Foundation as of January 1. He heads rehabilitation services in the center and was previously a Fellow there.

Julio Bobes MD, PhD (Spain), appointed Professor of Psychiatry of the University of Oviedo and one of the Heads of the Psychiatric Service of the Principality of Asturias, has recently been appointed an International Fellow of the APA, and a member of the Section on Education in Psychiatry of the World Psychiatric Association.

The European Commission has granted to the University of Hamburg, Germany within its program "Quality of Life and Management of Living Resources (The Fifth Framework Programme)" two projects on HRQL and children, to **Monika Bullinger** (Germany), "Quality of Life in Children and Adolescents with Disabilities and their Families—

Assessing patient Views and Patient Needs for Comprehensive Care" and **Ulrike Ravens-Sieberer** (Germany), "Screening for and Promotion of Health-Related Quality of Life in Children and Adolescents—A European Public Health Perspective."

The Cancer Research Campaign's CRC Psychosocial Oncology Group, under Professor **Lesley Fallowfield DPhil, BSc** (UK) has relocated to The School of Biological Sciences, University of Sussex, Falmer, Brighton BN1 9QG, email crc@biols.susx.ac.uk. Tel. no. (0)1273 873017.

This April, ISOQOL Board member **Shunichi Fukuhara MD, MSc** (Japan), currently Professor of Epidemiology and Health Care Research at Kyoto University School of Medicine and Public Health, will chair the first Pan-Pacific Conference of the International Society for Quality of Life Research (ISOQOL) in Tokyo. He hopes to raise money for an "Asian travel fund" from this conference, awarded to assist young researchers from Asian countries to attend the ISOQOL conference.

Li Lingjiang MD, PhD (China), Director and Professor, Mental Health Institute, Hunan Medical University, has a new address: #86 Renmin Middle Road, Changsha, Hunan, 410011, P.R.China.

Benoit Arnould (France) reports that on December 4, 2000, MAPI Research Institute (Lyon, France), DW Coordinating Center (California, USA), CPR Institute (St.Petersburg, Russia) launched ERIQA (The European Regulatory Issues on Quality of Life Assessment) Project in Russia. Representatives of the Russian Drug Agency, the Ministry of Health of Russian Federation, other national regulatory agencies participated a one-day ERIQA seminar in Moscow.

Benjamin Movsas MD (USA) has recently been appointed as Chair of the Radiation Therapy Oncology Group (RTOG) Quality of Life Committee.

Marcie Parker PhD, CFLE (USA), who is Senior Qualitative Researcher with

Optum in Minneapolis, Minnesota, is now a member of the Board of Directors of the American Hospice Foundation.

On October 23, 2000, **Sam Salek PhD** (UK), Director of the Centre for Socioeconomic Research, University of Wales, Cardiff, was awarded Honorary Membership of the Royal Colleges of Physicians of the UK, Faculty of Pharmaceutical Medicine, in a ceremony held at the Royal College of Physicians in London.

Norman Sartorius MD, PhD (Switzerland) announces that the book on Quality of Life in Mental Disorders by Katschnig, Freeman and Sartorius will appear in Japanese shortly, co-edited by Profs. Nakane and Tazaki. A study of HRQL of adolescents in China, Japan and Singapore has been completed. Information can be obtained from Prof. Shinfuku, in Kobe, fax 011 81 78 382 5717. The paper describing some of the results will be published in English shortly, probably in the American Journal of Psychology. This is the first study on HRQL in adolescents in Asia.

Ho C. Shin MD (Korea), Associate Professor, Department of Family Medicine, Kangbuk Samsung Hospital, Sung Kyun Kwan University School of Medicine has recently been named an editor of the Korean Journal of Family Medicine.

Søren Ventegodt MD (Denmark) announces that The Quality of Life Research Center in Copenhagen, Denmark, famous in the Nordic countries for reinterpreting HRQL and using development of HRQL as the basic tool for holistic rehabilitation, has been offered a new "House of Health" for holistic medicine and health research in central Copenhagen. The considerable budget for the operation, funded by a private foundation, makes it one of the hot spots in holistic medical research. A book on the Center's HRQL philosophy, available in most of the Nordic languages, is on its way to the American market. To learn more, check the group's home page www.fcl.dk.

ISOQOL Conference: November 7-10, 2001 Amsterdam, The Netherlands



Important 2001 Annual Meeting Dates:

- May 1, 2001 ~ Abstracts Due (www.isoqol.org)
- June 30, 2001 ~ Notification Sent about Abstracts
 - July 30, 2001 ~ Presenter Confirmation Due;
Early Registration Deadline

Invited Speakers, Workshops, Papers & Posters

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SCHOLARSHIPS OFFERED FOR ANNUAL CONFERENCE

This year, ISOQOL is offering Scholarships, designed to provide monetary assistance for conference fees, travel and hotel accommodations to young investigators and those who reside in developing countries and who can demonstrate need. To obtain an application, please call 703/556-9222; fax 703/556-8729; e-mail info@isoqol.org or visit the website at www.isoqol.org.

CALENDAR OF EVENTS

- ***ISOQOL Pan-Pacific Conference**
April 13-15, 2001, Tokyo Japan
- **International Symposium on HRQL and Pharmacoeconomics Studies: HRQL Measures**
April 5-6, 2001, Buenos Aires City Argentina
- **6th Annual International Society for Pharmacoeconomics and Outcomes Research (ISPOR) Conference**
May 20-23, 2001, Arlington Virginia, USA
Registration Deadline: May 1, 2001
- **Réseau Espérance de Vie en Santé (REVES) International Network on Health Expectancy 13th Annual International Meeting**
June 28-30, 2001, Vancouver BC, Canada
Registration Deadline: May 1, 2001
- **Palliative Medicine and HRQL International Conference**
September 28-29, 2001, St. Petersburg Russia
Abstract Deadline: June 1, 2001
Registration Deadline: August 1, 2001
- ***ISOQOL 8th Annual Conference**
Nov. 7-10, 2001, Amsterdam The Netherlands
Abstract Deadline: May 1, 2001
Registration Deadline: July 30, 2001
- **Fourth Conference of the International Society for Quality-of-Life Studies "How to Measure Quality of Life in Diverse Populations"**
Nov. 29-Dec. 1, 2001, Wyndham Hotel, Washington, DC
Abstract Deadline: June 1, 2001
Registration Deadline: Sept. 1, 2001
- ***ISOQOL 9th Annual Conference**
Oct. 29-Nov. 3, 2002, Orlando Florida, USA

*Sponsored by ISOQOL

POSITIONS AVAILABLE

The CPR Institute is looking for medical psychologists who are willing to participate in interviewing patients and/or healthy volunteers mostly in Moscow and St. Petersburg, Russia. The CPR Institute is also looking for translators, native Russian speakers fluent in English, and native English speakers fluent in Russian, who live in St. Petersburg and are willing to participate in linguistic validation of Quality of Life instruments. Detailed curriculum vitae should be sent to Vera Skridlyak by e-mail: verun@cpr.spb.ru.

ISOQOL Board member Geri Padilla announces that she is working with Donna Dulet, an executive search consultant, seeking a PhD with a strong background in HRQL research and demonstrated expertise in the field of patient reported outcomes to be a resource to Global Outcomes Research management and staff for a **pharmaceutical company in the Midwest USA**. If interested or to offer a recommendation, e-mail Geri Padilla at geraldine.padilla@cancer.org or donna@bryantresearch.com.

International Society for Quality of Life Research (ISOQOL)

Mission Statement

The scientific study of Quality of Life Relevant to health and healthcare is the mission of the International Society for Quality of Life Research (ISOQOL). The Society promotes the rigorous investigation of health-related quality of life measurement from conceptualization to application and practice. ISOQOL fosters the worldwide exchange of information through:

- Scientific Publications
- International Conferences
- Educational Outreach
- Collaborative Support for HRQL Initiatives

Membership Benefits

- Reduced subscription rate for the *Quality of Life Research* Journal
- Reduced registration rates at ISOQOL's Annual Meeting and workshops which are held all over the world throughout the year
- Opportunity to present and hear cutting edge research presentations and posters at the Annual Meeting
- Membership Directory
- Access to the Members Only section of the website
- Complimentary receipt of quarterly newsletters
- Opportunity to have special interest group meetings at the Annual Meeting
- Exposure to and participation with other professionals involved in quality of life research activities

The 2001 ISOQOL Annual Meeting will take place 7-10 November in Amsterdam, The Netherlands.
Chairs: Neil Aaronson, PhD and Mirjam Sprangers, PhD



International Society for Quality of Life Research

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