2020 ABSTRACT SUBMISSION ANNOUNCEMENT

In an effort to ensure an appropriate balance between theory, methods and application at the ISOQOL Annual Conference, there will be a major change to the primary abstract categories for the 2020 submission process.

NEW PRIMARY ABSTRACT CATEGORIES

Theoretical Work

Abstracts in this category use theory to advance the understanding of HRQL phenomena. Such work might include novel efforts to explain known associations or relationships observed in the literature; modifications or extensions to theories that are routinely or historically used in HRQL research and applications; or applications of an established theory from another field to HRQL phenomena. Abstracts in this category should not be presenting new data (including qualitative or formative work) or meta-analyses, but may reference published data in support of a theory.

Example Titles

- Comparative Analysis of Philosophical Conceptions of Well-Being in Different Health Status Measures
- A Dialogic Approach to Assessing Quality of Life
- Toward a Theoretical Model of Quality-of-Life Appraisal: Implications of Findings from Prior Studies of Response Shift
- Hermeneutics as a ‘lens’ in the interpretation of patient-reported outcome measures
**Methodological**

Work in this category reports on qualitative or quantitative methods for developing and evaluating patient-reported health status, as well as methods for analyzing and interpreting scores from such measures of health assessments. While the work might feature a particular disease area or measure, the primary aim of the work is to present a method rather than present findings about a particular measure or population.

**Example Titles**

- Triangulating estimates of meaningful change or difference in patient-reported outcomes: application of a correlation-based weighting procedure
- Mind the (inter-rater) gap. An empirical investigation of self-reported and proxy-reported quality of life in the derivation of childhood utility values for economic evaluation
- Handling informative drop-out in longitudinal analysis of health-related quality of life: Application on data from the oesophageal cancer clinical trial PRODIGIE5/ACCORD17
- Accommodating heterogeneity to improve measurement validity in large population health surveys
- Correspondence between Q-Sort and Individual Interviews for Concept Elicitation

**Application: Clinical Research**

Abstracts in this category use patient-centered measures to better understand the nature, prevention, treatment and management of different health conditions. Approaches used in this category could include qualitative or quantitative, randomized or non-randomized, cross-sectional or longitudinal, and meta-analyses.
Example Titles

- Psychometric properties of DEMQOL and DEMQOL-Proxy in people with dementia: a Rasch based analysis
- Health-related quality of life of Dutch children and adolescents with a chronic health condition aged 6 to 18 years
- A randomized implementation study to evaluate an ePRO system for monitoring adverse events after discharge following major abdominal cancer surgery
- Developing a conceptual framework for a new patient-reported outcome measure for children with eczema: A qualitative study of children and parents
- Phase I and II development of an EORTC QOL cancer survivorship assessment strategy: issue generation and construction of provisional questionnaires
- Factors associated with community ambulation in adults aged 45-85 – the Canadian Longitudinal Study on Aging

Application: Clinical Care Applications

Abstracts in this category include reports of efforts to integrate the patient’s voice more effectively into clinical encounters. Examples include descriptions of experiences implementing a standardized PRO collection system in a single clinic, reports of the development of a streamlined questionnaire battery for patients to complete prior to visits, and efforts to develop better reports for clinicians of patients’ PRO data over time. It is expected that abstracts in this category are more descriptive in nature with limited sample sizes. Larger and/or randomized studies should be categorized as Clinical Research.
Example Titles

- The Process of Capturing Patient-Reported Outcomes Electronically to Improve Dermatologic Care
- Bridging the gap between research and daily practice: optimization and implementation of mHealth tool PsyMate™ in primary care
- Development of a patient education program for patients undergoing body contouring after massive weight loss
- Clinical Application and Usage of Patient Reported Outcome Measures in an Orthopaedic Outpatient Setting

Application: Policy

Abstracts in this category focus on issues relevant to the requirement, development and large-scale (e.g., Health System, Government) application of patient-reported outcomes in health care practice, regulatory, and population/surveillance settings. Abstracts may include program evaluation, case studies and economic analyses.

Example Titles

- Embedding patient and public involvement within the Centre for Patient Reported Outcomes Research
- Common Issues Encountered in Regulatory Review of the Development of Clinical Outcome Assessments
- Can Patient-Reported Outcomes Assessment Be Brought to Scale? Lessons from a Statewide PRO-focused Quality Improvement Initiative
- Stakeholder Perspectives on the Use of Patient-Generated Health Data to Transform Healthcare