

O91 Effects of cognitive impairment and age on PROMIS-57 Profile responses

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Objective: The PROMIS Profile instruments have not been widely tested in the older adult population, especially those age 80+ nor those with mild cognitive impairment (MCI) or dementia. The reliability and validity of responses from those with MCI or dementia on PROMIS measures is unknown. The study aim was to assess the quality of responses of older adults with different levels of cognitive function on the PROMIS-57 Profile measure.

Methods: In Phase 1 of this study, we conducted qualitative cognitive interviews with adults aged 65 and older, and with Montreal Cognitive Assessment (MoCA) scores 10-30. We stratified the sample based on age (65-79, 80+) and cognition (MoCA scores 10-17, 18-25, and 26-30). Each interview was coded, and themes were derived based on these codes.

Results: Four themes of response difficulty were identified: 1) comprehension, 2) use of response set, 3) disability-related adaptation and activity limitations, and 4) frame of mind. Difficulty with Comprehension and with Mapping onto the Response Set were most commonly seen in the lowest MoCA group (10-17). Problems with adhering to the 7-day timeframe and mismatches of response and rationale were more common in the middle MoCA group (18-25) and the 65-79Y group. Response difficulty due to disability-related adaptations were common in the 65-79Y group, and the middle and highest MoCA groups (MCI and normal cognition). An optimistic outlook was more likely to influence responses in the cognitively intact and 80+ groups. Audio transcript examples will be presented to demonstrate the 4 themes of response difficulty and their correlation with age, cognitive function, education, and diagnosis.

Conclusions: This study shows that cognitive impairment and aging affect the accuracy and reliability of patient response on the PROMIS-57 Profile measures, demonstrating the need for patient-reported outcome measures customized for these populations. Clinicians should be aware of the common limitations of patient responses on validated questionnaires when caring for older adults with and without cognitive impairment.