

The Underactive Thyroid Treatment Satisfaction Questionnaire (ThyTSQ)

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ThyTSQs and ThyTSQc: Choosing which version to use and when

People can use just the ThyTSQs. The ThyTSQc is relevant for studies involving an intervention (such as a change in dose or education / training). Whether or not you use the ThyTSQc, you should always use the ThyTSQs at least once during your study, preferably at the beginning. This will anchor your findings on the ThyTSQc, if you do go on to use the change version as well as the status version. The ThyTSQc will tell you how people's satisfaction and perceived symptoms of hypothyroidism have changed; it doesn't tell you whether it was high or low to start with, or where it is at endpoint. We recommend that you use the ThyTSQs at baseline and endpoint (and at one or two interim points in a 12-month trial) and the ThyTSQc (if used) at one follow-up only.

1. ThyTSQs

1.1 Using the ThyTSQs

We recommend that you use the ThyTSQs at baseline and endpoint (and perhaps at one or two interim points in a 12-month trial). If there is a long gap between baseline and follow-up (e.g. a year or more), you may wish to repeat the ThyTSQs in order to have a picture of how satisfied people are during that period. The ThyTSQs can be completed by patients at intervals throughout a treatment period and when steady increases in their ThyTSQs scores are seen, this provides useful evidence that scores are determined by experience and are not simply a hopeful response to a new treatment, (see Witthaus et al. 2001 in relation to the DTSQ). Use of the ThyTSQs six or eight weeks after baseline may be useful to assess early adjustment to treatment. At least six weeks is desirable between repeated administrations to avoid overlap of responses.

1.2 Scoring the ThyTSQs

The ThyTSQs has seven items covering different aspects of satisfaction with current treatment, and produces the following scores:

- *Total Present Treatment Satisfaction.* All 7 items are summed to produce a ThyTSQs Satisfaction score (range: 0 to 42): the higher the score, the greater the satisfaction with current treatment.
- *Individual items covering aspects of present satisfaction with treatment.* All 7 items can be considered separately. All items are rated from 6 (very satisfied, convenient, etc.) to 0 (very dissatisfied, inconvenient, etc.): The higher the score, the greater the satisfaction with each aspect of current treatment.

2. ThyTSQc

2.1 *Scoring the ThyTSQc*

The change version has the same 7 items as the status version. The ThyTSQc instructions and response options differ from those of the ThyTSQs to produce measures of relative change in satisfaction rather than measures of absolute satisfaction:

All responses are rated: +3 ('much more satisfied', 'much more convenient' etc.) to -3 ('much less satisfied', 'much less convenient' etc.). The higher the score, the greater the improvement in satisfaction with each aspect of treatment and the lower the score, the greater the deterioration in satisfaction with each aspect of treatment.

2.2 *Wording of the ThyTSQc instructions*

The wording at the beginning of the instructions needs to relate to the particular intervention in your study. Thus it may need to be changed to be suitable for your particular study. We have produced a wording for the beginning of the introduction that is as generic as possible to minimise the need for changes, but you may need to adapt the wording to be suitable for the study duration and type of intervention. The wording has been based on the study design in which it is most commonly used (i.e. a randomised controlled trial). It may therefore need to be changed for use in an observational type of study. Please note that the last two sentences beginning "Please answer each question...", are the same for all occasions. These latter sentences should not be changed.

Please include in your protocol the details, in English, of any change to the wording of the ThyTSQc instructions for your particular study. If a run-in treatment period is included and involves a change of treatment for at least some people, the comparison is probably best made with treatment prior to commencement of the study. For crossover studies we would recommend that you make one comparison at the very end of the study, asking participants to compare their current treatment with the previous treatment.

Availability

The ThyTSQ is made available to users by formal arrangement with Health Psychology Research Ltd. Requests should be made to info@healthpsychologyresearch.com. A user agreement is necessary to avoid breach of copyright and to ensure that the latest and most appropriate version of the questionnaire is used.

Evidence of licensing may be required by regulators, editors and/or examiners.

Contact Information

For permission to use the ThyTSQ and to ensure that you have the most up-to-date version, please contact:

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Selected References

ThyTSQs

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DTSQ

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