

# Measuring improvement in dyspnoea: absolute or relative?

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# Relative or absolute?

- The MCID for absolute change for chronic symptom:
  - 5mm/11.3mm/18mm (distribution)
  - 9mm (patient anchor)
- The MCID for relative change is not known
- Empirical changes used varying 10 – 25%
- Which should we use in reporting and in study design?
- CONSORT recommend both in abstract and text of study reports
- Review: relative values only in abstract (88%) and main text (75%)

King, N. B., Harper, S., and Young, M. E. Use of relative and absolute effect measures in reporting health inequalities: structured review. *BMJ* 345: e5774, 2012

# Measurement of MCID

- Distribution method
  - Effect size: change in mean score from baseline/SD baseline scores
  - smaller group data variability indicates greater “clinical precision” in the perception of study measure by the individuals studied
  - different study populations should have a similar level of precision over the perception of study measure and in a change in that measure
- Patient anchor
  - Global impression of change
  - Symptom relief score
  - Choice of one intervention over another

# Methods

- Analysis of pooled data from four clinical trials of opioids for breathlessness (213 datasets from 178 participants).
  - The variability of difference from baseline against baseline measure for absolute and ratio values was examined and displayed graphically.
  - The MCID was estimated using a patient anchor (blinded study arm preference).



# Patient preference anchor

- 113 preference responses for 93 participants.
- Comparison of preferred and unpreferred arm ratios showed a difference of  $-14.4\%$ .
- Skewed data: calculation using log ratios gave a difference of  $-20.5\%$  (after anti-log).
- Therefore patient anchor MCID (relative)  
= 14-21%

**NB** cannot calculate effect size using  $Dd/SD$  of  $D_b$  for a relative value

# Conclusions

- Reported outcomes should be presented as both absolute and relative measures
- Use absolute measures for sample size calculation.
  - uniformity of variation
  - ability to calculate effect size
- The MCID in chronic breathlessness expressed as a relative reduction is 15-20% of baseline measures
- Next question: do patients perceive an improvement of 11.3mm as moderate irrespective of baseline intensity?