# Patients' Understanding, Expectations, and Satisfaction with Care

Dear Editor,

I read with great interest a research article titled "Translation and psychometric analysis of the Malaysian version of medication understanding and use self-efficacy scale (M-MUSE) for diabetes mellitus" by Al Abboud et al. published in the current issue of Archives of Pharmacy [Al Abboud S, Ahmad S, Bidin M, Ismail N. Translation and psychometric analysis of the Malaysian version of medication understanding and use self-efficacy scale (M-MUSE) for diabetes mellitus. Arch Pharm Pract 2017;8:64-9]. I would like to emphasize the importance and significance of the findings of the study by Al Abboud et al. in this article and share the results of other studies that explored the validation of similar domains that were tested for reliability and validity among patients attending a diabetes clinic.

Similar to Al Abboud et al., in other studies, the domain of learning about medications is defined as treatment understanding,[1] ability to use the information they learned,<sup>[2]</sup> self-care management and treatment satisfaction,<sup>[3]</sup> and the quality of care.<sup>[4]</sup> All these studies were conducted in settings similar to the one described by Al Abboud et al.

The English version of Diabetes Treatment Satisfaction Questionnaire (DTSQ) was linguistically validated into Greek to measure treatment understanding. DTSO consisted of eight items rated on a 0 to 6 scale and had six items addressing treatment understanding, as opposed to four items in the study by Al Abboud et al. Patients in this study were attended by a generalist and not by a diabetes specialist. The authors of this study concluded that the instrument was found reliable and valid to be used in a Greek setting.<sup>[1]</sup> The Patient Assessment of Chronic Illness Care (PACIC) is a 20-item questionnaire. It was translated by a standardized forwardbackward procedure similar to the one performed by Al Abboud et al. and administered to 560 patients receiving type 2 diabetes care. The questionnaire had five domains including their ability to use the information they learned, which had items similar to the study by Al Abboud et al. The Danish PACIC version showed good face validity and endorsed the five proposed scales for patient-reported involvement in diabetes care.

The effectiveness of self-care and the treatment of diabetes mellitus were assessed using Patient-Reported Outcomes in DM in Thai (PRO-DM-Thai) patients. This instrument comprised seven dimensions and 44 items including physical function, symptoms, self-care management, psychological and social well-being, the global judgments of health, and satisfaction with care, and the flexibility of treatment. The domain of self-care management and satisfaction with care are similar to the ones tested by Al Abboud et al. The PRO-DM-Thai questionnaire showed a high level of internal consistency and validity on factor analysis.[3] Patient Satisfaction with Pharmacist Services Questionnaire (PSPSQ 2.0) consisted of 22 items related to three domains identified as the quality of care, patient-pharmacist relationship, and overall satisfaction using a four-point, Likert-type scale. It was tested for its internal consistency and validity using exploratory factor analysis. The reliability of the scale using internal consistency metrics revealed a Cronbach's alpha of 0.98 and 0.98 for the domain quality of care. Factor analyses resulted in a three-factor solution accounting for 91% of variance. The overall mean item score was 3.7 on a four-point scale. The findings of Al Abboud et al. are in congruence with this study.<sup>[4]</sup>

The results of the validation studies discussed above establish the fact that the patients' understanding of treatment, expectations, and satisfaction from their healthcare providers and services are global in nature regardless of geographical, cultural, and linguistic barriers and boundaries. Instruments measuring medication understanding and self-efficacy or those that consisted of similar domains/dimensions developed in any country will produce reliable and valid results if such instruments have gone through a rigorous language and cultural adaptation process. This will instill confidence among researchers in the area of patient-reported outcomes that the cross-cultural and linguistic adaptation of such measures is possible and useful to advance research and patient care.

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#### Conflicts of interest

There are no conflicts of interest.

#### Prashant Sakharkar

Department of Clinical and Administrative Sciences, Roosevelt University College of Pharmacy, Schaumburg, IL, USA Address for correspondence: Dr. Prashant Sakharkar, Department of Clinical and Administrative Sciences, Roosevelt University College of Pharmacy, Schaumburg, IL 60713, USA. E-mail: psakharkar@roosevelt.edu

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