BACKGROUND AND AIMS: When assessing quality of care the outcome in terms of quality of life (QOL) is of major significance. This study examined QOL in IBD outpatients and the contribution of individual expectations and various other factors including disease activity.

PATIENTS AND METHODS: The study included 306 outpatients with Crohn’s disease and 109 with ulcerative colitis (UC). General and health-related QOL was quantified using the instrument Questions on Life Satisfaction (Modules). Disease activity was assessed by a questionnaire. Data were compared with a normal population sample.

RESULTS: Life satisfaction scores on general items and on health-related items were significantly lower than in a control sample (60.5 +/- 37.3 and 74.4 +/- 41.5, respectively) among both CD patients (54.3 +/- 33.2, 59.1 +/- 38.8) and UC patients (45.4 +/- 34.0, 52.1 +/- 40.7). Scores were significantly related to severity of disease activity. IBD patients attributed particular importance to health-related issues.

CONCLUSION: Both health-related and general life satisfaction is compromised in IBD outpatients, and health-related topics have major impact. Not surprisingly, inflammatory activity compromises QOL, which underlines the importance of anti-inflammatory strategies. The importance attributed to health-related features is higher in IBD patients than in the normal population.