General and health-related life satisfaction of patients with community-acquired pneumonia.

Abstract:
When assessing the quality of care, patients' characteristics such as general and health-related life satisfaction, are of major significance. Our study examined the general and health-related life satisfaction of patients with community-acquired pneumonia (CAP). To quantify the general and health-related life satisfaction, we used the validated instrument Questions on Life Satisfaction (Modules) by Henrich and Herschbach. CAP cases included in the German competence network on CAP (CAPNETZ) were asked to answer questions on their personal satisfaction with aspects of their life and health and on the individual importance of each addressed aspect. Data were compared with a normal population sample. In addition, several subgroup analyses were conducted. One thousand eight hundred ninety-nine (50.5%) CAP patients returned the questionnaire within a median time of 3 days. The mean age of the study sample was 55.1 +/- 17.1 years, 47.0% were female. The CAP patients reported not only a lower satisfaction with health (52.1 +/- 42.6 vs. 74.4 +/- 41.5, p< 0.001), but also a lower general life satisfaction (55.0 +/- 35.2 vs. 60.5 +/- 37.3, p< 0.001) than the normative German sample. Subgroup analyses revealed a significantly impaired general life satisfaction in patients with comorbidities (52.2 +/- 34.7) compared with patients without any underlying disease (58.1 +/- 35.4, p = 0.001). A non-significant lower general
life satisfaction (53.3 +/- 35.1 vs. 57.0 5 +/- 35.2, p = 0.052) as well as a lower health-related life satisfaction (49.25 +/- 42.0 vs. 55.3 +/- 43.0, p = 0.602) could be observed in men compared with those in women. Patients aged 65 years and older and patients with a severe CAP reported a lower health-related life satisfaction, but a higher general life satisfaction than younger patients or patients with mild CAP. The lower general life satisfaction observed in patients with CAP was found to reflect comorbidity rather than the effects of the pneumonia itself.