Measure Yourself Medical Outcome Profile: MYMOP

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An outcome measure for primary care should:

- Measure the aspects and effects of the illness which the patient decides are most important
- Enable the patient to score the chosen parameters
- Be reliable
- Be a sensitive measure of change over time
- Be applicable to the whole spectrum of illness seen in primary care
- Be brief and simple enough to complete in a 10 minute consultation
<table>
<thead>
<tr>
<th>MYMOP (part of)</th>
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<tbody>
<tr>
<td><strong>SYMPTOM 1:</strong></td>
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| **SYMPTOM 2:**    | 1 | 2 | 3 | 4 | 5 | 6 |
| .................. | As good as it could be | As bad as it could be |

| **ACTIVITY:**     | 1 | 2 | 3 | 4 | 5 | 6 |
| .................. | As good as it could be | As bad as it could be |

Lastly how would you rate your general feeling of wellbeing during the last week?

| **WELLBEING:**    | 1 | 2 | 3 | 4 | 5 | 6 |
| .................. | As good as it could be | As bad as it could be |
Complete a MYMOP form

- Think back to the last time you were ill and went to the doctor or a therapist
- Or, think about a family member or friend who was ill recently

- Fill in the MYMOP form by yourself
- Talk to the person(s) next to you for a few minutes about how that was for you
Lastly how would you rate your general feeling of wellbeing during the last week?

WELLBEING: .........0 1 2 3 4 5 6

.................As good as it
..................................could be

As bad as it could be
Patient-based outcome measures: criteria for evaluation

- Appropriateness
- Reliability
- Validity
- Responsiveness
- Precision
- Interpretability
- Acceptability
- Feasibility

MYMOP & SF-36 pilot study (1995)

- 265 patients, before and after treatment
- Evidence of reliability (coeff. 0.67 – 0.8)
- Highly responsive to change (index responsiveness 0.85; SF-36 0.3)
- Therapists generally preferred the MYMOP questionnaire, because it was individualised and acceptable to patients.
- Results confirmed in 2nd study comparing SF-6

VALIDITY

Does the instrument measure what it claims to measure?

Does MYMOP measure the outcomes which the patient considers most important?
MYMOP with 176 CAM patients (2003)

- All new patients of 12 CAM practitioners
- MYMOP before, during and 4 months after treatment
- Patients interviewed and practitioner focus groups
- Importance of medication reduction led to revision of MYMOP to MYMOP2 – current version

MYMOP chart for patient 41

**Symptom1**: difficulty breathing.
**Symptom2**: excess mucous in the air passages.
**Activity**: I cannot go out freely
## Types of outcome questionnaire: two dimensions of choice

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<thead>
<tr>
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<th>Pre-set</th>
<th>Individualised</th>
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<tbody>
<tr>
<td>generic</td>
<td>EuroQol</td>
<td>SEIQoL</td>
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<tr>
<td></td>
<td>SF-36</td>
<td>PGI</td>
</tr>
<tr>
<td>Problem specific</td>
<td>The Bournemouth Questionnaire</td>
<td>Measure Yourself Medical Outcome Profile (MYMOP)</td>
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</table>
MYMOP: strengths

- It is patient-centred
- It is applicable to any problem: especially useful in settings where patients have a wide variety of problems.
- It is brief, with high response and completion rates. Popular with practitioner-researchers.
- The patient’s own words are used, which avoids conflicts over diagnosis. Especially useful for multidisciplinary care.
- Validation studies have included patients of both orthodox and complementary practitioners.
- It’s simplicity makes it easy to chart the scores of individual patients over time. e.g. case studies.
- It is very responsive to change.
MYMOP: limitations

- The first time that MYMOP is completed, the patient requires some structured guidance.

- It is problem specific: unsuitable for patients who cannot identify a ‘most important problem’ and may miss treatment effects that are not related to the chosen problem, except as they affect wellbeing.

- The seven-day timescale: unsuitable for infrequent episodic problems such as migraine and menstrual problems.

- The individualised nature of MYMOP makes it unsuitable as a basis for economic evaluations.
Gateway Clinic Study 2006

- NHS acupuncture and Chinese medicine clinic in Lambeth
- GP referrals, mainly longstanding conditions
- Consecutive new referrals completed set of questionnaires, repeated at 6th treatment session and by post at 6 months

Response rates

- Of the 210 patients who were eligible for the study, 205 patients were recruited.
- Of these 205 patients, 78 (38% of initial sample) dropped out of treatment before their 7th appointment. Of the 127 who returned for their 7th treatment, 116 patients completed and returned their questionnaires (91% of those attending and 57% of original sample).
- The six-month postal questionnaires were completed by 78 patients (38% of initial sample).
**MYMOP Profile scores**

- MYMOP profile at baseline
- MYMOP profile after 6 treatments
- MYMOP profile at 6 months

The graph shows a comparison of MYMOP profile scores at baseline, after 6 treatments, and at 6 months. The scores are represented on a scale from 0.00 to 5.00. The profile at baseline shows a higher mean score, indicating a worse condition compared to the other two time points, which show a mean score of 3.00, suggesting a better condition.

Mean scores:
- Baseline: 4.00
- After 6 treatments: 3.00
- At 6 months: 3.00
Euroqol-5D scores

better

worse

Mean

0.000 0.200 0.400 0.600

EuroQol-5D at baseline  EuroQol-5D after 6 treatments  EuroQol-5D at six months

Baseline  After 6 treatments  At 6 months
MYMOP-qual: adding an open question to collect qualitative data

Question and analysis developed as part of the MYCaW questionnaire (see MYMOP website)

‘What has been most important for you? Reflecting on your visits to the acupuncturist, what were the most important aspects for you?’

81% responded to this optional open question
'What has been most important for you?

“Regularity, kindness, super competence of practitioners which has led me to trust more than I have ever trusted any practitioner. Clear information, great listening, learning about the interconnectedness of all my symptoms for the first time. Being taken seriously, being treated with respect.”

(after 6 treatments)
What has been most important for you?

“Friendliness of staff, not feeling judged, increase in energy levels, feeling more relaxed, having time to myself away from usual stresses. Great improvement in health, no UTI's at all, and no need to take antibiotics, excellent service and great ethos.”

(after 6 months)
Analysis of this qualitative data into categories

Most common categories for ‘what has been important’:

- Effect on symptoms
- Relaxation & sleep
- Wellbeing & general benefit
- Practitioner listening & empathy
- Coping & self-care
- Clinic atmosphere & organisation.
MYMOP website

http://sites.pcmd.ac.uk/mymop

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By placing a tick (thus ☐) in one box in each group below, please indicate which statements best describe your own health state today.

**Mobility**
- I have no problems in walking about
- I have some problems in walking about
- I am confined to bed

**Self-Care**
- I have no problems with self-care
- I have some problems washing or dressing myself
- I am unable to wash or dress myself

**Usual Activities (e.g. work, study, housework, family or leisure activities)**
- I have no problems with performing my usual activities
- I have some problems with performing my usual activities
- I am unable to perform my usual activities

**Pain/Discomfort**
- I have no pain or discomfort
- I have moderate pain or discomfort
- I have extreme pain or discomfort

**Anxiety/Depression**
- I am not anxious or depressed
- I am moderately anxious or depressed
- I am extremely anxious or depressed

**Compared with my general level of health over the past 12 months, my health state today is:**
- Better
- Much the same
- Worse

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EuroQol Instrument
Choosing an outcome measure

- **What outcomes are likely?**
  Ask patients, practitioners, researchers, the literature.

- **Objective and subjective measures**

- **Subjective measures:**
  - generic/problem specific
  - pre-set/ individualised

- **Practicalities:**
  - Ease and speed of use
  - Self completed/ interview administered
  - Ease of scoring
  - Single score/ separate dimensions
  - Patient acceptability
Examples of other individualised measures

The Patient-generated Index, PEI.
Measures ‘health related quality of life’, developed by Andrew Garratt and Danny Ruta

Short form individual quality of life measure, SEIQoL.
Measures ‘Quality of Life’, developed by Ciaran O’Boyle and colleagues

Goal attainment scaling

Disease specific measures from McMaster University:
G.H.Guyatt and E.F Juniper. For asthma, chronic lung disease, frail elderly

MACTAR Patient Preference Disability Questionnaire
Tugwell et al, for arthritis.
Set of outcome questionnaires for people having acupuncture for chronic health problems

- MYMOP-qual
- Medication Change Questionnaire
- Wellbeing questionnaire W-BQ12
- Patient Enablement Index, PEI-ac
- (for economic evaluations) SF-36
- (optional) problem-specific questionnaire