Minimal clinically important differences for Dyspnea-12 and MDP scores are similar at 2 weeks and 6 months: follow-up of a longitudinal clinical study

Magnus Ekström, Hans Bornefalk, C. Magnus Sköld, Christer Janson, Anders Blomberg, Jacob Sandberg, Anna Bornefalk-Hermansson, David C. Currow, Miriam J. Johnson and Josefin Sundh

Affiliations: 1Lund University, Faculty of Medicine, Dept of Clinical Sciences Lund, Respiratory Medicine and Allergology, Lund, Sweden. 2Hans Bornefalk AB, Vallentuna, Sweden. 3Respiratory Medicine Unit, Dept of Medicine Solna and Center for Molecular Medicine, Karolinska Institutet, Stockholm, Sweden. 4Dept of Respiratory Medicine and Allergy, Karolinska University Hospital Solna, Stockholm, Sweden. 5Dept of Medical Sciences: Respiratory, Allergy and Sleep Research, Uppsala University, Uppsala, Sweden. 6Dept of Public Health and Clinical Medicine, Section of Medicine, Umeå University, Umeå, Sweden. 7Uppsala Clinical Research Center, Uppsala University, Uppsala, Sweden. 8IMPACCT, Faculty of Health, University of Technology Sydney, Ultimo, Australia. 9Wolfson Palliative Care Research Centre, University of Hull, Hull, UK. 10Dept of Respiratory Medicine, Faculty of Medicine and Health, Örebro University, Örebro, Sweden.

Correspondence: Magnus Ekström, Dept of Medicine, Blekinge Hospital, SE-37185 Karlskrona, Sweden. E-mail: pmekstrom@gmail.com

This paper reports minimal clinically important differences (MCIDs) for measuring different aspects of breathlessness using the instruments D-12 and MDP at long-term follow-up (6 months), which were similar to MCIDs at short-term (2 week) assessment.

Cite this article as: Ekström M, Bornefalk H, Sköld CM, et al. Minimal clinically important differences for Dyspnea-12 and MDP scores are similar at 2 weeks and 6 months: follow-up of a longitudinal clinical study. Eur Respir J 2021; 57: 2002823 [https://doi.org/10.1183/13993003.02823-2020].

To the Editor:

Chronic breathlessness is a dominating symptom that restricts daily life for many people with cardiorespiratory disease [1]. Different dimensions of the symptom, such as the intensity, sensory qualities and emotional responses, can be assessed using the instruments Dyspnea-12 (D-12) [2] and the Multidimensional Dyspnea Profile (MDP) [3], which share similarities in the underlying constructs of what is measured [4] and have emerged as widely used instruments for multi-dimensional measurement of breathlessness.