Estimating loss in quality of life associated with asthma-related crisis events (ESQUARE): a cohort, observational study

Table 1: Week 4 statistics for each quality of life questionnaire

<table>
<thead>
<tr>
<th>Item</th>
<th>N</th>
<th>Mean</th>
<th>SD</th>
<th>Range</th>
<th>Response rates</th>
<th>Floor effects</th>
<th>Ceiling effects</th>
</tr>
</thead>
<tbody>
<tr>
<td>EQ-5D-5L (utility)</td>
<td>71</td>
<td>0.740</td>
<td>0.264</td>
<td>-0.005 to 1.00</td>
<td>58.7%</td>
<td>0.00%</td>
<td>15.5%</td>
</tr>
<tr>
<td>EQ-5D VAS score</td>
<td>73</td>
<td>65.9</td>
<td>21.42</td>
<td>11.00 to 100.00</td>
<td>60.3%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>AQLQ overall score</td>
<td>70</td>
<td>4.09</td>
<td>1.48</td>
<td>1.47 to 6.94</td>
<td>57.9%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>EQ-5D VAS score</td>
<td>85</td>
<td>3.34</td>
<td>2.12</td>
<td>0.00 to 7.00</td>
<td>70.2%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>AQLQ Activity score</td>
<td>85</td>
<td>3.32</td>
<td>2.00</td>
<td>0.00 to 7.00</td>
<td>70.2%</td>
<td>0.00%</td>
<td>0.00%</td>
</tr>
<tr>
<td>AQLQ Emotional score</td>
<td>85</td>
<td>3.36</td>
<td>2.27</td>
<td>0.00 to 7.00</td>
<td>70.2%</td>
<td>0.00%</td>
<td>2.40%</td>
</tr>
<tr>
<td>AQLQ Environmental score</td>
<td>85</td>
<td>3.63</td>
<td>2.34</td>
<td>0.00 to 7.00</td>
<td>70.2%</td>
<td>0.00%</td>
<td>1.20%</td>
</tr>
<tr>
<td>TTO (utility)</td>
<td>87</td>
<td>0.820</td>
<td>0.264</td>
<td>0.000 to 1.00</td>
<td>77.7%*</td>
<td>0.00%</td>
<td>51.7%</td>
</tr>
</tbody>
</table>

*The response rate is based on the denominator being 112 due to only the participants based at the Norwich hospital site (NNUH) being asked the TTO questions. All of the other response rates for the PROMS were based on the denominator being 121 as this was the total number recruited across all hospital sites where each participant was asked to complete PROM questionnaires.

Ranges for PROMs: EQ-5D-5L (-0.281 to 1); EQ-5D VAS (0 to 100); AQLQ (0 to 7); AQL-5D (0 to 1); TTO (0 to 1).