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Correlation between visual analogue scales and patient reported outcome measures in sarcoidosis

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Background: Patient-reported outcome measures (PROMs) are widely used in clinical trials to assess symptoms and quality of life, but their integration into clinical practice remains limited due to time demands, complexity, and scoring challenges. While visual analogue scales (VAS) are increasingly used, their correlation with other PROMs has not yet been established in sarcoidosis.

Methods: We used baseline data from the PREDMETH trial (PMID: 40387020), a randomized controlled trial in patients with pulmonary sarcoidosis. Patients completed various PROMS, including the EuroQol Five-Dimension Five-Level questionnaire (EQ-5D-5L), the Fatigue Assessment Scale (FAS), and the King's Sarcoidosis Questionnaire (KSQ), and VAS on dyspnea (VASD), fatigue (VASF), and general wellbeing (VASG). Correlations were evaluated using Spearman's correlation coefficients.

Results: PROM data were available for 136 patients. Mean age was 46 years; 27% were female. VASD, VASF, and VASG correlated moderately to strongly with EQ-5D-5L, FAS and, KSQ (table 1).

	EQ-5D-5L-VAS	EQ-5D-5L index	FAS	KSQ – General Health	KSQ – lung Score
VASD	-0.428 *	-0.437*	0.457*	-0.429*	-0.651*
VASF	-0.509*	-0.523*	0.609*	-0.636*	-0.597*
VASG	0.480*	0.408*	-0.416*	0.482*	0.380*

*$p < 0.001$. Higher EQ-5D-5L index, EQ-5D-5L VAS, and KSQ scores indicate better health status. Higher FAS scores indicate worse fatigue. Higher VASD and VASF scores indicate worse symptoms; higher VASG scores indicate better general health.

Conclusion: In patients with pulmonary sarcoidosis, VAS scores showed moderate to strong correlations with various related PROMs, suggesting that VAS may serve as a simple and feasible alternative to assess symptom burden and wellbeing. Longitudinal validation of VAS in sarcoidosis is ongoing.