

teachers, based on the Diagnostic and Statistical Manual for Mental Health-IV, of the American Association of Psychiatry (DSM-IV); to compare the level of agreement amongst teachers, and between teachers and parents, in the identification of children with ADHD symptoms.

Method: A questionnaire with questions taken from the DSM-IV and other sources was applied to the subjects' teachers, in a public school of Curitiba. ADHD prevalence and subtypes related to age, gender and type of teacher were analysed, as well as the level of agreement between teachers. The clinical sample was taken from the school sample. The children were evaluated by a medical/psychological team, and the questionnaire was applied to the parents. After comparing the DSM-IV criteria (parents and teachers' questionnaires) with the clinical evaluation (gold standard), the BQ, versions for teachers and parents, with a minimum of questions for the attention and hyperactivity/impulsivity dimensions, was developed. The construct accuracy and validity of the teachers' version were tested on students from another public school, and of the parents' version, on a clinical sample.

Results: The ADHD BQ is made of seven items (three of the attention deficit dimension and four of the hyperactivity/impulsivity dimension) in the teachers' version

and of eight items (four of the attention deficit dimension and four of the hyperactivity/impulsivity dimension) in the parents' version. Prevalence according to the teachers was 12 %. The level of agreement related to the questions amongst the teachers was low in both the school and the clinical samples, as well as between teachers and parents. The BQ, compared to the DSM-IV, showed higher sensitivity in the clinical sample. The correlation and sensitivity were adequate when compared to another school and clinical sample.

Discussion: The ADHD BQ, versions for parents and teachers, elaborated from the Initial Questionnaire based on the DSM-IV, presented a discriminative capacity similar to the DSM-IV. After the reliability and validity tests in a more representative population, it may be of great clinical and epidemiological usefulness. ADHD high prevalence, according to teachers, is compatible with research results. The low agreement amongst teachers, and between them and the parents, reaffirmed in this study, should alert clinicians to the need of evaluating rating scales and questionnaires from different sources with the greatest care.

KEY WORDS: attention-deficit/hyperactivity disorder, prevalence, DSM-IV, questionnaires, rating scales.

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QUALITY OF LIFE IN EPILEPTIC PATIENTS (ABSTRACT)*. DISSERTATION. SÃO JOSÉ DO RIO PRETO/SP, 2007.

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Epilepsy is a chronic disorder that affects the quality of life, especially in its critical periods, when the disease disadvantage life's cultural, personal and social aspects as well as family relationships. This study analyzed the quality of life in epileptic patients (QV) related to different issues: social, physical and emotional, all of them correlated to the disease and individual variables: the perception of seizure control.

Patients from the outpatient's clinic of Hospital de Base and those identified in the community of São José do Rio Preto were compared. 165 patients diagnosed with epilepsy were evaluated by Quality of Life 65 Questionnaire (QQV-65). 87 female and 78 male, from the ambulatory service of Hospital de Base (N=105) and patients from the community (N=60) of São José do Rio Preto city. Their ages ranged between 18 and 75 years

old (mean=41.28; standard deviation=13.26). The study showed significant associations between age and final quality of life (p-value = 0.003) as well as education and final quality of life (p= 0.001). There was significant relation between perception and seizure control and all the aspects of QV: total range of QV (p=0.000), health (p=0.000), physical aspects (p=0.000), social aspects (p=0.003), locus of control (p=0.000), self-concept (p=0.25), emotional aspects (valor - p=0.000) and cognitive aspects (value - p=0.009).

There was no correlation between patients' origin (ambulatory or outpatients' clinic) and the final quality of life and its aspects (health, physical, cognitive, emotional, self-concept and locus of control).

KEY WORDS: quality of life, epilepsy, adult population study.

*Estudo sobre qualidade de vida utilizando-se QV-65 validado na UNICAMP para avaliar duas populações de pacientes com epilepsia, sendo uma formada por pacientes com base hospitalar e outra com base populacional. Dissertação de Mestrado, Faculdade de Medicina de São José do Rio Preto, FAMERP (Área: Ciências da Saúde). Orientador Moacir Alves Borges.

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