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## Original Article

### Evaluation of Patients Satisfaction Level and Quality of Life (QOL) Receiving Physical Therapy Care for Musculoskeletal Disorders in Public and Private Hospitals

Hafiz Muhammad Almas Sabir<sup>1</sup>, Maira<sup>1</sup>, Amna Tariq<sup>1</sup>, Maryam Naveed Sheikh<sup>2</sup>, Hamna Rehman<sup>3</sup>, Tamjeed Ghaffar<sup>4</sup>, Kainat Malik<sup>5</sup>, Urooj Manzoor<sup>1</sup> and Kaiynat Shafique<sup>1</sup>

<sup>1</sup>Sabir Physiotherapy Clinic & Rehabilitation Center, Faisalabad, Pakistan

<sup>2</sup>Time Institute, Multan, Pakistan

<sup>3</sup>Abwa Medical College and Research Centre, Faisalabad, Pakistan

<sup>4</sup>Government College University Faisalabad, Faisalabad, Pakistan

<sup>5</sup>Prime Care Hospital, Lahore, Pakistan

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### \*Corresponding Author:

Urooj Manzoor  
Sabir Physiotherapy Clinic & Rehabilitation Center,  
Faisalabad, Pakistan  
[uroojsgd2@gmail.com](mailto:uroojsgd2@gmail.com)

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## ABSTRACT

Patients' satisfaction is the experience of an attitude and effective response that is related to beliefs that the physiotherapy service provided to patient must have adequate component and dimension. **Objective:** To measure the satisfaction level and quality of life of patients in both public and private hospitals of Faisalabad. **Methods:** It was a comparative cross-sectional study with sample size of 278. A simple random sampling technique was used to collect data from patients receiving physical therapy care in both the public and private sectors. The outcome measures of the study were the multidimensional "Queen Mary's Satisfaction Survey" and the "SF-36 Questionnaire" to check level of satisfaction and overall QOL. The collected data were then analyzed by SPSS version-22. **Results:** About 6.5% patients from government and 35% from private hospitals were highly satisfied from the physiotherapy services. 46% patients from government and 64% from private reported to have an excellent quality of life. Independent t-test revealed that p value was less than 0.05 for both satisfaction level and quality of life in patients receiving physiotherapy from private and government sectors of Faisalabad. **Conclusions:** A significant difference was found between quality of life and satisfaction level of patients receiving physiotherapy from private and government hospitals of Faisalabad. Patients of private hospital reported higher level of satisfaction and QOL as compared to the government hospitals.

## INTRODUCTION

Musculoskeletal problems are the leading cause of disability [1]. These problems may result in severe discomfort, swelling that makes the movement difficult, and leads to poor mobility [2]. Musculoskeletal disorder occurs due to sudden exertion, awkward posture, micro trauma and repetitive motion [3]. Musculoskeletal and orthopedic problems affect the entire body and severely

limit the patients' ability to perform daily activities [4]. These problems are costly and expensive and require significant care and time to cure them [5]. Patients with these muscle-related problems frequently have trouble in doing their office work and other employments, which makes it difficult for them to make money and ultimately results in financial issues [6]. Physiotherapy play an

important role in relieving pain, restoring functioning, and improving quality of life [7]. The severity of their signs and symptoms and interference with ADLs influence their decision to use physiotherapy services [8]. Physical therapy appointments recommended by doctors typically aid patients in resolving their bone and muscle problems [9]. It is crucial to make sure patients are satisfied while receiving physical therapy for skeletal and muscular problems. Clinical staff and physical therapists must be skilled at identifying and addressing each patient's unique needs [10]. By meticulously measuring and evaluating patient satisfaction levels, pain assessments, and activities of daily living, healthcare professionals are empowered to identify areas for enhancement and refine their approaches accordingly [11]. Quality of life is a broad multi-dimensional concept, refers to how well we live, i.e., the general well-being of people and societies [12]. It is the standard of happiness, comfort, and health of that individual or group outcome. A patient's satisfaction level with physiotherapy is critical to determining whether the care he received is appropriate or not. It mimics a significant indicator that lets us know how well issues are resolving. By comprehensively examining satisfaction levels alongside key factors such as quality of life, pain management, and activities of daily living, across diverse healthcare settings, valuable insights can be gleaned to inform and guide the refinement of treatment approaches. Ultimately, this endeavor strives to enhance patient well-being and optimize the delivery of physiotherapy services [13]. A qualitative inquiry was undertaken to investigate the subjective experiences of individuals afflicted with enduring musculoskeletal pain undergoing physiotherapeutic intervention. The sample comprised eleven participants presenting with pain localized in the dorsal, cervical, or scapular regions. Data were gathered through semi-structured interviews and subjected to qualitative content analysis for interpretation and understanding. The establishment of a trusting therapeutic alliance and ongoing dialogue with the physiotherapist emerged as crucial elements. The active engagement of both participants and physiotherapists in personalized exercises, activities, and other therapeutic approaches resulted in advantageous modifications in behavior, as well as the acquisition of novel knowledge and heightened bodily consciousness. The findings highlight the efficacy of physiotherapy in primary care for individuals coping with persistent pain [14]. The purpose of the study was to evaluate the quality of life (QOL) and patient's satisfaction level receiving physical therapy for musculoskeletal disorders in both public and private hospitals. The existing literature has limited research focusing on patient satisfaction and QOL specifically

related to physical therapy interventions in different healthcare settings. This study aimed to fill a research gap by investigating how well physical therapy works for skeletal and muscular problems. Study focused to learn about how well patients feel and how well physical therapy improves their lives. Identifying patient's satisfaction and their quality of life can aid in the development of better treatments and better healthcare system. The study findings help the therapist to improve the overall well-being of patients and help healthcare professionals to use more effective approaches.

## METHODS

It was a comparative cross-sectional study with sample size of 278. A simple random sampling technique was used to collect data from patients receiving physical therapy care in both the public and private sectors of Faisalabad. Sample size was calculated by open epitool software. A total of 278 participants, from both public and private sectors, were included in the study, according to the defined selection criteria. Inclusion criteria of the study were patients with age between 35 and 75 years, who had been receiving physiotherapy care for MSDs from a minimum duration of one week. The exclusion criteria entailed the exclusion of participants without any musculoskeletal disorders, those afflicted by psychological conditions, as well as individuals displaying cognitive or behavioral imbalances. The required data from the study participants was collected through, Queen Mary's Outpatient Physiotherapy patient satisfaction survey which is specifically designed to assess patients' satisfaction and SF-36 questionnaire. The SF-36 questionnaire is used to evaluate quality of life, which includes eight QOL domains, was developed and validated as a generic short-form tool for assessing quality of life, and it was extensively used in the Medical Outcomes Study to evaluate significant QOL domains [15]. Previous research showed Test-retest reliability ( $r > 0.70$ ) and internal consistency ( $> 0.70$ ) of SF-36 questionnaire [16]. For data collection, first researcher explain the purpose of study to the participant and informed consent form was signed by the patient, then researcher fill out the questionnaires by asking questions to the patients. Then the overall score of patient's satisfactions and QOL was calculated. The overall score of Queen Mary's Outpatient Physiotherapy patient satisfaction survey was divided into five categories. From 0 to 6 patient was considered very satisfied, from 7 to 14 patients were considered unsatisfied, from 15 to 24 satisfaction level of patients was considered neutral, from 25 to 34 patients were considered satisfied and having score from 35 to 42 patients were considered highly satisfied from the physiotherapy treatment. SF questionnaire has eight sections and each section has a

score of 100. The overall score of Quality of life was compiled by calculating the percentage of total points. From 0 to 24, QOL was considered as poor, from 25 to 49 QOL was categorized as fair, from 50-69-point quality of life was considered as good, from 70 to 84 QOL was considered as very good and from 85 to 100 QOL was categorized as excellent. A permission letter signed by the HOD of the department was used to get permission for data collection from the required hospitals. The study received permission from institutional review board of Government College University Faisalabad. Prior to data collection, informed consent forms were signed by all study participants. Patients privacy and dignity was prioritized. Collected data were analyzed by SPSS version 22.0. Descriptive statistics were illustrated as frequency and percentage and independent t test was used to analyze the significant difference in patient's satisfaction and quality of life of private and government hospitals.

### RESULTS

Figure 1 shows the gender distribution; 50.35% of study participants were males, while 49.63% were females. The majority of participants were between the age of 35 to 44 years (30.6%). Consequently, 19.8% were between 45 to 54 years, 17.7% patients were between 55 to 64 years, 29.1% were between 65 to 74 years and only a small proportion about 1%, were between 75 to 84 years (Figure 2).

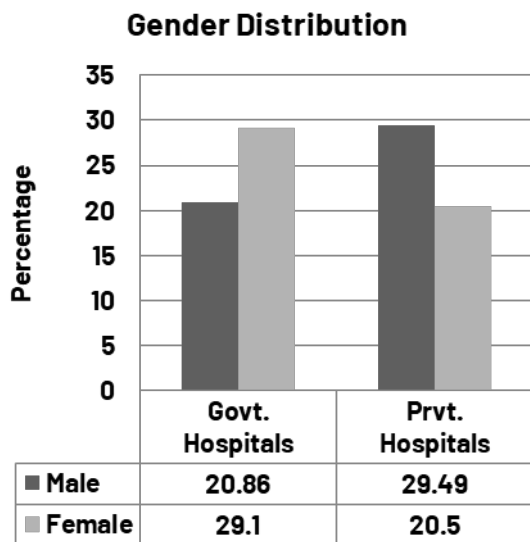


Figure 1: Gender of Participants

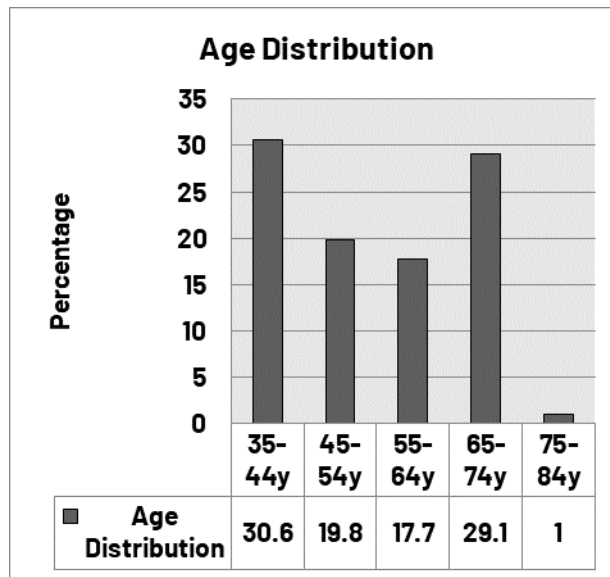


Figure 2: Age of Participants

Table 1 showed the frequency and percentage of overall patient's quality of life. 46% patients from government hospital and 64% from private hospitals had excellent quality of life. 40.3% patients of government and 28% patients from private hospitals reported to have very good quality of life. 12.2% had good, 1.4% had fair and 0% patients reported to had poor quality of life from government hospitals. Among patients that were receiving physical therapy from private hospitals, only 5.8% had good, 0.7% reported fair and 0% had poor quality of life.

Table 1: Overall score of QOL

Govt. Hospital Patients (n=139)		Private Hospital Patients (n=139)	
Quality of Life	F (%)	Quality of Life	F (%)
Poor	0(0)	Poor	0(0)
Fair	2(1.4)	Fair	1(0.7)
Good	17(12.2)	Good	8(5.8)
Very Good	56(40.3)	Very Good	40(28.8)
Excellent	64(46.0)	Excellent	89(64)

Table 2 demonstrates the overall score of patient's satisfaction level. From government hospitals, 6.5% patients were highly satisfied, 24.5% were satisfied, 29.5% were neutral, 26.6% were dissatisfied and 12.9% were very dissatisfied from physical therapy services they received for musculoskeletal disorders. From private hospitals, 23% were highly satisfied, 36% were satisfied, 21.6% patients were neutral, 15.1% were dissatisfied and 4.3% patients were very dissatisfied from physical therapy treatment, they were receiving for musculoskeletal disorders.

**Table 2:** Queen Mary's Outpatient Physiotherapy patient satisfaction survey overall score

Govt. Hospital Patients (n=139)		Private Hospital Patients (n=139)	
Satisfaction level	F (%)	Satisfaction level	F (%)
Very dissatisfied	18(12.9)	Very dissatisfied	6(4.3)
Dissatisfied	37(26.6)	Dissatisfied	21(15.1)
Neutral	41(29.5)	Neutral	30(21.6)
Satisfied	34(24.5)	Satisfied	50(36.0)
Highly satisfied	9(6.5)	Highly satisfied	32(23.0)

Independent T test showed that there is a significant difference ( $p=0.00$ ) in satisfaction level of government and private hospital patients. Patients of private hospitals were more satisfied as compared to government hospital patients. Also, there is a significant difference ( $p=0.04$ ) in QOL of government and private patients. Patients of private hospital had better quality of life than government hospital patients (Table 3).

**Table 3:** Independent sample t-test

Patients' Satisfaction			
Sector	t	df	Sig.(2-tailed)
Government	-5.42	276	0.00
Private			
QOL of Patients			
Government	-2.06	276	0.04
Private			

## DISCUSSION

Musculoskeletal disorders have a significant impact on people's functional status and their ability to perform daily activities. Physical therapy interventions are critical in relieving pain, restoring functional abilities, and improving patients' overall quality of life [7]. The aim of the study was to recognize the factors of the patient satisfaction and quality of life in the outpatient physical therapy department of both public and private hospitals of Faisalabad. In the current study, from govt. hospitals 24.5% patients were satisfied and 6.5% were highly satisfied and from private hospitals 36% patient were satisfied and 23% were highly satisfied with the physical therapy services they received for musculoskeletal disorders. Also 46% patients of government hospital and 64% patients of private hospitals had excellent quality of life. Moderate quality of evidence from previous studies indicated that patients who access physiotherapist directly for their problems lead superior outcomes like healthcare expenses, disability reduction and also the quality of life [17]. Results of recent study showed that there was a significant difference in patient satisfaction ( $p = 0.00$ ) and QOL ( $p = 0.04$ ) in government and private hospitals. Patients receiving physical therapy from private hospital were more satisfied and have better quality of life than government hospital. But in contrast to this a

study of united Arab Emirate by Hamda et al., in found no significant difference in perceived quality of health services received by patients in private and public hospitals [18]. In recent study significant difference were found between satisfaction and QOL of patients in public and private hospitals. This difference might be due to the fact that therapists' in private hospitals listen patients' problems more attentively and give appropriate time to complete the treatment sessions. A study by Tanveer et al., revealed that interpersonal communication skills exhibited by therapist have a major impact on patients' level of satisfaction. Effective communication between doctor and patient leads to more positive and satisfactory experience of treatment on patients [19]. In recent study, patients of private hospital reported higher level of satisfaction and QOL as compared to the government hospitals. Factors that contributed to higher satisfaction level and quality of life were more personalized care, advance modalities, proper interaction of therapist to patients, limited waiting time, and better treatment services. In line with these results, a study by AisyaPutri et al., indicated that positive correlation was found between patient satisfaction level and higher quality of services provided in cases related to sport injuries [20]. The limited sample size of the study may affect the generalizability of this research to broad level. Moreover, it relied only on self-reported data of patients regarding to satisfaction and quality of life which may subject to biasness or false reporting by patients. Further research with broader sample size is recommended to enhance generalizability. Further studies are recommended with incorporating objective measurement including medical reports and clinical assessment rather than self-reported measures only. This was provided more comprehensive outcomes. Government should focus to improve healthcare services in public hospitals to enhance the experience of patients and quality of life.

## CONCLUSIONS

A significant difference was found between quality of life and satisfaction level of patients receiving physical therapy services from private and government hospitals of Faisalabad. Patients of private hospital reported higher level of satisfaction and QOL as compared to the government hospitals. Factors that contributed to higher satisfaction level and quality of life were more personalized care, advance modalities, proper interaction of therapist to patients, limited waiting time, and better treatment services.

## Authors Contribution

Conceptualization: HMAS

Methodology: M, AT

Formal Analysis: MNS

Writing-review and editing: HR, TG, KM, UM, KS

Author have read and agreed to the published version of the manuscript.

### Conflicts of Interest

The authors declare no conflict of interest.

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