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Multidimensional Fatigue Inventory: Spanish adaptation and psychometric properties for fibromyalgia patients. The Al-Andalus study

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ABSTRACT
Objectives. The aim of this study was to assess the psychometric properties and cross-cultural adaptation of the Spanish multidimensional fatigue inventory (MFI) in fibromyalgia patients.
Methods. The Spanish version of the Multidimensional Fatigue Inventory (MFI-S) was translated and cognitively pre-tested following cross-cultural adaptation guidelines. Test-retest reliability, convergent validity, and operational validity were evaluated in a sample of 16 fibromyalgia patients. Convergent validity was assessed comparing MFI-S with a visual analogue scale for global fatigue.
Results. The intra-class correlation coefficient varied from moderate to excellent (from 0.64 to 0.91) and the internal consistency of the mean ranged from 0.7 to 0.9. The MFI-S demonstrated a high degree of operational validity with two standard deviations and the highest percentage of patients found between each MFI-S dimension and the visual analogue scale (0.72 to 0.82). The mean time required to complete the MFI-S was 2.2 (2.0) minutes. None of the patients needed external help to complete the MFI-S, and there were very few missing values.
Conclusions. The MFI-S developed in this study presents a good reliability and reasonable construct validity for Spanish fibromyalgia patients and is of good operational validity and ease of administration and acceptability.

Introduction
Fibromyalgia syndrome is a systemic chronic musculoskeletal pain disorder characterized by multiple tender points (1, 2) that can lead to significant patient disability and high economic burden on society (3, 4). Fibromyalgia is found primarily in women (5) and is also typically accompanied with a wide variety of symptoms, such as sleep disturbances, reduced physical work capacity, fatigue (6), stiffness, mood disorders (4, 6), and cognitive disturbances (7). Fatigue greatly impacts quality of life and has been identified as one of the most characteristic symptoms in fibromyalgia patients (8, 9). Fatigue is also common in all chronic diseases (8), in other chronic patients (10) and in general population (11). It is difficult to measure fatigue because of its fluctuating and subjective nature and the many factors that influence the way fatigue is experienced (12, 13). The subjectivity of the symptom reinforces the importance of self-report measures in measuring the fatigue levels of new, injured, and the professional's (14). However, different instruments might generate different results, even when fatigue is assessed in the same person at the same moment (15). Consequently, valid and reliable methods to assess fatigue are fundamental for its treatment.

Several fatigue assessment instruments have been developed both for the general population and for various patient populations (16, 17). Instruments available to assess fatigue in patients can be divided into one-dimensional and multidimensional instruments. The Brief Fatigue Inventory (BFI) and Fatigue Severity Scale (FSS) measure fatigue severity and have been widely used in one-dimensional methods. The use of a multidimensional instrument offered however the opportunity to obtain a profile of fatigue that would provide information on the nature of the experience, and to identify:

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