

# #HEJC transcript

## Healthcare Social Media Transcript

**From:** Mon Feb 04 12:00:00 PST 2013  
**To:** Mon Feb 04 13:15:00 PST 2013  
*change time period*

Who were the influencers during this time period? **#HEJC analytics**

Connecting the dots in healthcare social media: Healthcare Conference - Tweet Chats - Healthcare Analytics

What is #HEJC?

**aheblog**

Welcome to this month's #HEJC. For links to the paper and some possible discussion points visit <http://t.co/zwb7Byr>

Mon Feb 4 12:02:05 PST 2013

**nchadborn**

Haven't finished reading it, but looking forward to interesting discussion #hejc

Mon Feb 4 12:02:37 PST 2013

**nchadborn**

@mikey3982 @aheblog sounds a bit quiet and echoey #hejc

Mon Feb 4 12:12:53 PST 2013

**nchadborn**

So I can get my stupid questions in first - interested in different patient grps responses to 'happiness' - eg chronic / acute #hejc

Mon Feb 4 12:14:52 PST 2013

**nchadborn**

...multimorbidity v. 'simple' / 'treatable' - do these different grps have different views on happiness or value of quality of life #hejc

Mon Feb 4 12:15:58 PST 2013

**ChrisSampson87**

Bit late me @nchadborn would expect SWB to be less sensitive to chronic conditions due to adaptation (maybe) #HEJC

Mon Feb 4 12:17:25 PST 2013

**nchadborn**

Thanks @ChrisSampson87 - well kick us off with some intelligent comment / question then! #hejc

Mon Feb 4 12:18:47 PST 2013

The paper claims not to assume interval properties in the discussion, but pretty

**ChrisSampson87**

sure it does if we're using linear weightings? #HEJC

Mon Feb 4 12:19:39 PST 2013

**nchadborn**

Erm... just looking at the results now... #hejc

Mon Feb 4 12:21:24 PST 2013

**nchadborn**

I thought the logit analysis assumed scales were ordered but not interval - haven't found linear weightings yet... #hejc

Mon Feb 4 12:23:40 PST 2013

**ChrisSampson87**

As there are some positive odds ratios, would it be possible to have a health state greater than 1? I haven't worked it out... #HEJC

Mon Feb 4 12:26:22 PST 2013

**mikey3982**

@nchadborn I can't remember how HoDar codes multimorbidity and it would be interesting looking at this complexity over time #hejc

Mon Feb 4 12:27:54 PST 2013

**ChrisSampson87**

@nchadborn you're right, I mean they'd assume linearity in their application... Or at least the paper doesn't explain otherwise #HEJC

Mon Feb 4 12:29:40 PST 2013

**nchadborn**

@ChrisSampson87 They say the positive odds ratios are counter-intuitive, then try to explain them as indirect effects... #hejc

Mon Feb 4 12:30:42 PST 2013

**nchadborn**

@ChrisSampson87 are 'indirect' effects some kind of artifact? or else seem to indicate a problem with the model? #hejc

Mon Feb 4 12:31:56 PST 2013

**ChrisSampson87**

@nchadborn I think it's a problem that will repeat in the use of SWB. People's SWB can improve following illness... #HEJC

Mon Feb 4 12:33:04 PST 2013

**ChrisSampson87**

@nchadborn ...because they apply greater importance to other parts of their life aside from health #HEJC

Mon Feb 4 12:33:44 PST 2013

**nchadborn**

@ChrisSampson87 That's interesting in itself! But are you saying that the positive odds ratio is an indication of general incr in SWB? #hejc

Mon Feb 4 12:36:02 PST 2013

**nchadborn**

@ChrisSampson87 I mean in some relation to severity of illness? Thus assuming SWB constant produces positive OR for 2 factors? #hejc

Mon Feb 4 12:37:11 PST 2013

**ChrisSampson87**

In places the paper talks about happiness as if it is continuous, 3rd sentence of results isn't very meaningful #HEJC

Mon Feb 4 12:37:30 PST 2013

**nchadborn**

... or am I way out of my depth here!!! ~-o/~- (waving / drowning) #hejc

Mon Feb 4 12:38:19 PST 2013

**ChrisSampson87**

Do the results say that 70% of people report a worst level of health on the SF-6D? Seems very high #HEJC

Mon Feb 4 12:39:35 PST 2013

**nchadborn**

Top of p104 in order to use SWB to provide weights, need to assume measure used has interval properties, clearly defined anchors #hejc

Mon Feb 4 12:44:43 PST 2013

**nchadborn**

For our main analysis we assume this not the case, although report OLS for comparability (what's OLS again - #TLA ) #hejc

Mon Feb 4 12:45:30 PST 2013

**ChrisSampson87**

@nchadborn ah, yes. No chance with a 4-point scale #HEJC

Mon Feb 4 12:46:46 PST 2013

**ChrisSampson87**

I do wonder what the value is of a general patient population valuation... #HEJC

Mon Feb 4 12:50:50 PST 2013

**ChrisSampson87**

... Surely the point of patient valuations is that they be used for a particular treatment for a particular health problem #HEJC

Mon Feb 4 12:51:53 PST 2013

**nchadborn**

Can you just sum up what we've learnt tonight then @chrissampson87 ? #hejc

Mon Feb 4 12:53:39 PST 2013

**ProfAlanMaynard**

RT @aheblog: Welcome to this month's #HEJC. For links to the paper and some possible discussion points visit <http://t.co/zwb7Byr>

Mon Feb 4 12:54:38 PST 2013

**ChrisSampson87**

@nchadborn ha! Not really! #HEJC

Mon Feb 4 12:58:46 PST 2013

**aheblog**

That's all for #HEJC this month. Thanks for taking part. A transcript will be available shortly at <http://t.co/zwb7Byr>

Mon Feb 4 13:02:04 PST 2013