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Test-retest reliability, concurrent validity and correlates of the two-minute walk test in outpatients with alcohol use disorder

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Highlights

- The 2-min walk test is a valid test in people with alcohol use disorders.
- Improvements of 18 m are beyond measurement error.
- Depression and pain should be considered when interpreting fitness test outcomes.

Abstract

We investigated the test-retest reliability of the 2-min walk test (2MWT) and its concurrent validity with the 6-min walk test (6MWT) in Ugandan outpatients with alcohol use disorder (AUD). We also explored practice effects, and assessed the minimal detectable change (MDC) and correlations with the 2MWT. Fifty outpatients [7 women; median age = 32.0 years] performed the 2MWT twice, the 6MWT once, and completed the Simple Physical Activity Questionnaire, Brief Symptoms Inventory-18 (BSI-18), and Alcohol Use Disorders Identification Test. The median (interquartile) 2MWT score on the first and second test were 162.0 (49.0) meters and 161.0 (58.0) meters, respectively, without significant difference between the two trials ($p = 0.20$). The intraclass correlation between the two 2MWTs was 0.96 (95% confidence interval = 0.94–0.98). The Spearman Rho correlation between the second 2MWT and the 6MWT was 0.91 ($p < 0.001$). The MDC for the 2MWT was 18 m. There was no evidence of a practice effect. Variance in BSI-18 depression and the presence of leg pain following the 2MWT explained 18.7% of 2MWT score variance. The 2MWT is a reliable and valid fitness test, which can be conducted without any special equipment or substantial time demands in outpatients with AUD.

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Keywords

alcohol; depression; fitness; pain; physical activity; walking

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