

EDITORIAL

Patient information for better health outcomes in primary care

Shared decision making is a common goal in health care. For this aim, general practitioners (GPs) need ways to engage their patients in decisions about health and skills to promote the self-management of patients. GPs face many challenges here; they must keep up-to-date on a wide scope of health issues, they must find ways to take the research evidence to the point-of-care and learn how to discuss the pros and cons of evidence with every individual patient.

Patients appear to highly value GPs that are informative and good communicators. A Danish survey to patients found that emphatic, patient-oriented, informative and coordinating were among the top GP qualities that the patients appreciated. Surprisingly, patients attached less importance to access to care [1].

In the era of information technology, the tools for shared decision-making improve rapidly. According to a Cochrane review [2], methods to improve shared decision-making include patient information pamphlets, decision aids and educational activities; however, there is not enough evidence about their relative effectiveness. Another Cochrane review studied the effects of decision aids on patient care. It showed that decision aids are effective in improving patients' knowledge about clinical options and in creating accurate risk perceptions. Decision aids also reduced patients' difficulty with decision-making and increased participation in the decision-making process [3]. Lately, it has been shown that decision aids are also effective in reducing the anxiety of patients [4].

Both health professionals and patients face challenges in understanding research evidence, especially with regard to the quality of the evidence upon which recommendations are made. An EU project called DECIDE has started developing strategies to better communicate research evidence to health professionals and patients. The project is a joint effort between guidelines producers and researchers from seven European countries and WHO. The five-year DECIDE project is funded by the European Commission's 7th Framework Programme and it is

based on the guidelines methodology development by the GRADE Working Group [5].

GPs will be involved in the DECIDE project as key stakeholders. The project aims at finding strategies for GPs and other clinicians to keep up with their information needs. It will also study the best strategies to transfer research information to patients as well as GPs' role in this communication.

The DECIDE project will give special attention to the group of patients with little education and low literacy. Lately, it has been shown that tailored decision support information can be effective also among adults with low levels of education [6].

There are recent papers in this journal on the challenges of shared decision-making in primary care. A Norwegian qualitative study focused on the needs of obese patients in general practice consultations. It showed that obese patients want their GPs to put their weight problems on the agenda. The challenge for the GP is to increase his or her competence in individualized and evidence-based counselling, and at the same time help the patient in efforts needed to achieve permanent change [7].

Another Norwegian qualitative paper studied patients' experiences with lifestyle counselling. It concluded that GPs should put the focus on a good relationship and personalized care in lifestyle consultations. The patients expect the GP to act as an encouraging informer, an explorer of everyday life and a reflective partner. They also wish for adjusted medical advice to patients' identity, context, and values [8].

GPs play an essential and trusted role in providing guidance to patients. To do this well, the information given to patients by GPs should be presented in a way that meets the information needs of patients and which can be easily used to support healthcare decisions. Although decision aids show promising results, only a few of them are currently available to GPs. High-quality written patient information is more available, but little is known of its usage and importance in GP consultations.

Good communication skills and effective use of research information will help to support well-informed

decisions that both patients and GPs are comfortable with. Such decisions are also likely to lead to better health outcomes.

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