

O112 Patient perspectives on a PRO-based report and coaching session to inform treatment decisions

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Objective: The Arthritis Care through Shared Knowledge (A.S.K.) study was a pragmatic, cluster-randomized, multi-site trial evaluating the effectiveness of a personalized PRO-based report for hip and knee osteoarthritis patients considering surgical care. To enhance patient understanding of the report and their PRO data, we also co-designed, implemented, and evaluated a virtual coaching session.

Methods: The study enrolled 5713 patients following an initial visit with an orthopedic surgeon to discuss knee and hip arthritis treatment options, including total joint replacement surgery. Patient perspectives about the report were evaluated in semi-structured interviews (n= 25). Coaching session content was co-designed with clinicians and patients (n= 10) recruited through the Arthritis Foundation. A subset of patients (n=1545) treated at randomly assigned study sites were then invited to a virtual coaching session led by a health educator. A total of 438 patients (28%) participated in the 1- hour, small group, structured, web-based sessions. We synthesized post-coaching self-assessments of learning, as well as qualitative data from free-text responses to that assessment, semi-structured post-coaching interviews, and paired pre-post coaching interviews. All qualitative data were iteratively analyzed by two investigators using a combination of deductive and inductive coding strategies.

Results: Qualitative interviews regarding the PRO-based report indicated that patients felt it provided information about their health, helped foster communication with their surgeon, and increased their decision confidence. Coaching participants' self-assessments showed improved understanding of current and projected osteoarthritis symptoms, and additional qualitative analyses supported that coaching enhanced understanding and potential use of PRO data. Suggestions for improvement included potential edits to the data presentation within the report to make the PRO scores easier to understand, and providing coaching in various formats including both asynchronous sessions and sessions that include more group interaction.

Conclusions: Study participants identified several benefits of receiving their PRO data and additional education through coaching. Returning PRO data to patients and supporting them in using that data has promise as a combined intervention to enhance patient-centered decisions. Future research should refine best practices for both PRO-based reports and patient education to use the data in clinical encounters.