

BACKGROUND

- Decision support tools provide patients with information to guide, identify, and clarify their values around a decision.
- These tools have been shown to improve patient knowledge and preparation for treatment decisions.
- This approach enhances shared decision-making between clinicians and patients.
- Research around patient decision support tools is relatively new in chronic disease management, and there are few if any, HCV treatment tools created with provider and patient input.

RESULTS

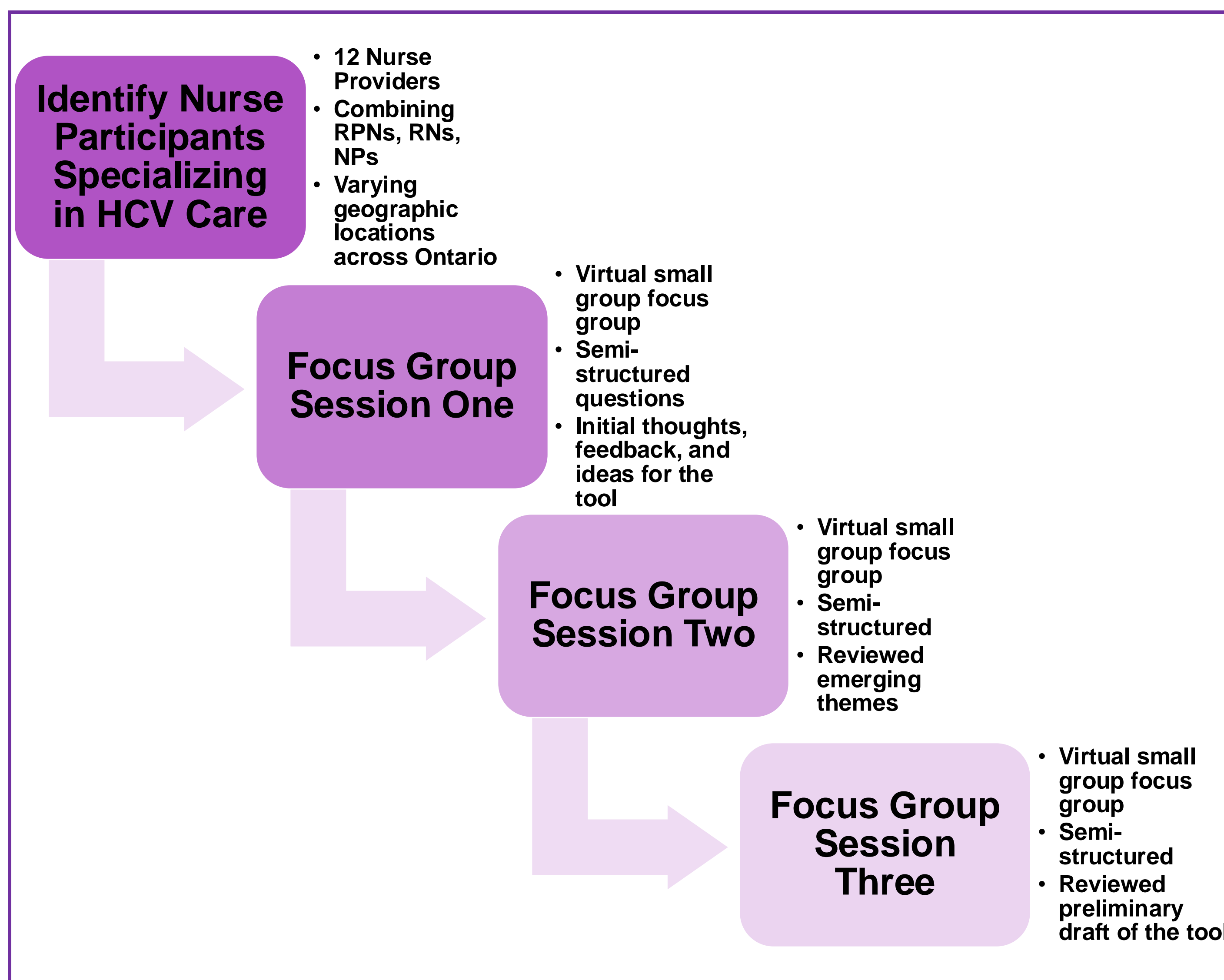


Figure 1. HCV decision support draft tool following iterative semi-structured focus groups among Canadian nurses.

OBJECTIVE

The purpose of this project is to develop the first HCV decision making support tool for treatment initiation. Developing HCV decision support tools for HCV treatment initiation is vital to engaging patients fully in their care while mitigating HCV transmission and reducing long-term complications.

METHODS



CONCLUSIONS

- This study has led to the development of a draft tool for HCV treatment decision making guided by the nurse end user. This tool may be of specific interest to new providers/prescribers.
- As a next step, the draft tool will be evaluated by the patient end user.
- Decision support tools lead to patient empowerment to make informed decisions about their treatment. By leveraging the insights from both nurses and patients, we can develop a highly effective tool that reflects the needs of both end users.

REFERENCES

- Matlock, D. D., and E. S. Spatz (2014). "Design and Testing of Tools for Shared Decision Making." *Circulation: Cardiovascular Quality and Outcomes* 7(3): 487-492.
- Austin, C.A., et al., Tools to Promote Shared Decision Making in Serious Illness: A Systematic Review. *JAMA Intern Med*, 2015. 175(7): p. 1213-21.
- Mills, R. and S.B. Haga, Qualitative user evaluation of a revised pharmacogenetic educational toolkit. *Pharmgenomics Pers Med*, 2018. 11: p. 139-146.
- Nota, I., et al., Development of a web-based patient decision aid for initiating disease-modifying anti-rheumatic drugs using user-centred design methods. *BMC Med Inform Decis Mak*, 2017. 17(1): p. 51.

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