

# News Release

3 June 2010  
For immediate release



## **NHS DIRECT PILOTS NEW APPROACH TO HELP PATIENTS MAKE TREATMENT DECISIONS**

NHS Direct is piloting three Online Decision Aids to help patients make informed healthcare choices in the first national web-based project of its kind in the UK.

The Online Patient Decision Aids (OPDA) have been designed for patients who are facing difficult decisions about medical tests or treatments, when there is no clinical evidence that one treatment is better than another and they don't know which will be best for them. They will increase patients' awareness of the expected risks, benefits and likely outcomes, empowering them to make informed choices about their care. In turn, this will also help ensure NHS resources are used appropriately.

Phase one of the pilot has included the development of an OPDA for patients with osteoarthritis of the knee, and the transfer onto the internet of two already developed Decision Aids for patients with an enlarged prostate or localised prostate cancer. All three will be trialled in the NHS across eight pilot sites over eight weeks from the beginning of June 2010.

Patients who are eligible to take part in the pilot will be given access to the OPDAs via their specialist clinician. Patients can review all the information, including the pros and cons of the treatment options available and can view filmed interviews with people who live with the conditions, before completing a short questionnaire to assess their treatment preferences. The questionnaire can then be used to support joint decision making between the patient and their clinician.

Subject to the successful completion of phase one, and pending intellectual property agreement, further stages will include the transfer online or development of up to six more OPDAs.

At present the only Patient Decision Aids that have been developed across the NHS are for patients with prostate cancer or an enlarged prostate, and these are only available in hard copy.<sup>1</sup> NHS Direct's web-first approach means in the future Decision Aids can be available in a variety of digital formats such as videos, interactive Q&As and webchats, with additional telephone support available via NHS Direct if required.

Although the pilot will be developed as a stand-alone web service with telephone support, the long-term aim is to develop a national multi-media NHS 'wrap' for OPDAs using NHS Direct's existing online health and symptom checker infrastructure.

The pilot will be evaluated by the University of Cardiff and NHS Direct. They will determine the most cost effective process of developing the OPDAs, and review their effectiveness, accessibility and acceptability to patients and clinicians, as well as

impact on services. If the evaluation proves that the online service can deliver benefits to patients and the NHS, it will be considered for national launch.

Mary Archer, Chairman, Urology Informed Decision Making Project, says:  
“The decision support programme is remarkable because it opens access to high quality peer approved information and support to help people faced with difficult treatment decisions. Making the programme available online extends access to the decision support service considerably and will enable us to keep it up-to-date with all the latest information.”

Ruth Rankine, Director of Strategy and Planning, NHS Direct, says:  
“NHS Direct is committed to working with other NHS organisations to explore innovative approaches to healthcare, utilising our national reach and scale. Our national multi-media infrastructure and experience of developing patient focused web services puts us in a unique position to develop Patient Decision Aids for the web and support their successful implementation and sustainability in the NHS.”

Dr Steven Laitner, Associate Medical Director, East of England SHA, says:  
“Making a decision about the best treatment for you can be difficult. Patient Decision Aids have a proven track record of helping patients and their clinicians to make informed choices. We know that surgery is not always the best option for patients, for example one in five people who have a knee replacement are not fully satisfied with the result<sup>2</sup>. International evidence suggests a 20 per cent reduction in ‘discretionary surgery’ when Decision Aids are used.<sup>3</sup> I have been working very closely with NHS Direct and other partners to develop the Online Patient Decision Aids and I am keen to see how, using this multi-media platform, we can extend the benefits to more patients and clinicians.”

The pilot has seen NHS Direct working in partnership with: NHS Institute for Innovation and Improvement (who provided initial support for the development of all three Patient Decision Aids), East of England SHA, Department of Health, Foundation for Informed Medical Decision Making and BUPA Health Dialog.

## **Ends**

For further information please contact Lisa Gaskell on 0207 599 4223 or the press office mobile on 07876 596932.

<sup>1</sup> The two Patient Decision Aids that were launched for national use in the NHS were developed by the National Urology Informed Decision Making Project, for localised prostate cancer and benign prostatic hyperplasia (enlarged prostate).

<sup>2</sup> National Joint Registry

<sup>3</sup> Evidence from the Cochrane Collaboration Review

The Foundation for Informed Medical Decision Making together with Bupa Health Dialog pioneered decision making tools within the USA, which provided inspiration for the development of these OPDAs.

### *Proven benefits of Patient Decision Aids:*

International evidence suggests a 20 per cent reduction in ‘discretionary surgery’ when Patient Decision Aids are used (Cochrane Collaboration review).

Research from the Ottawa Hospital Research Institute also states that patients who don't have decision support:

- Are 59 times more likely to change their mind
- Are 23 times more likely to delay their decision
- Are five times more likely to regret their decision
- Blame their practitioner for bad outcomes 19% more often

Screen shots of the osteoarthritis of the knee OPDA (if you would like to receive Jpegs of these images, please contact Lisa Gaskell on the above numbers).

**NHS Direct** Knee Arthritis Decision Support

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Living with knee arthritis

Understanding knee arthritis

### Living with knee arthritis

Although currently there is no cure for knee arthritis, with lifestyle changes and treatment, most people can live full and active lives. The goal of treatment is to reduce the pain, stiffness, and disability it causes. To decide what's best for you, it's helpful to look at the possible benefits and risks of each choice.

Living with knee arthritis can affect you emotionally as well as physically. Some people get frustrated or depressed from coping with pain and disability every day. Low mood can often make pain worse. It's a good idea to tell your health professional how your symptoms affect your mood and attitude to life. Then the two of you can decide on treatment that meets your needs.

This site aims to give you information on your choices to help you decide what's best for you at the moment. There isn't one "right" choice for treatment and the best options for you may change, but using non-surgical treatments and having surgery are different experiences with different risks. It's important to think about how each treatment might affect your life and then talk with your health professional about how you feel. Just because you choose one

Videos

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Comparing the treatments

The Pros and Cons

Check your understanding

What's best for you?

Your treatment preferences

### Comparing the treatments

Many people are able to live well using a combination of conservative (non-surgical treatments) to manage their knee pain and stiffness. In fact, one study found that, over a seven year period, knee pain had improved in about three out of ten people. Pain was more likely to get worse in people with other health problems or with social issues such as being out of work.

**Mild pain**

With mild arthritis pain, you can choose to watch and wait. You may consider lifestyle changes such as exercising, learning more about your arthritis, or losing weight. Or, you may consider non-drug treatments such as using knee supports, shoe inserts, capsaicin cream, or heat or cold to help with the pain.

**Worsening pain**

If the arthritis gets worse, you can decide whether to take over-the-counter or prescription medicines, use complementary therapies, or have injections into

Videos

Habib's story - the benefits of exercise

### About NHS Direct

- NHS Direct aims to provide remotely delivered care, over the phone and on the web, which is increasingly valued by patients and the wider health and social care system.
- The NHS Direct health information and advice line handles 14,000 calls a day. That's over 5 million calls a year.

- Over 50,000 patients access core NHS Direct services through the internet every day. That's 18 million visits a year.
- NHS Direct employs over 3,400 staff, over 1,400 of whom are trained nurses.