

ERAS 2019 - Abstract Submission

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PATIENT INFORMATION LEAFLETS FOR LUMBAR SPINE SURGERY: AN OPPORTUNITY FOR IMPROVEMENT IN ERAS PATHWAYS.

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Objectives: Enhanced Recovery after Surgery (ERAS) has recently been applied to lumbar spinal procedures, using evidence-based practice and improved pathways to encourage lower rates of morbidity and improve longer-term outcomes; however the evidence for adoption is limited. High quality patient information is recommended as part of ERAS pathways to attenuate procedure related anxiety. As increasing workload pressure continues to reduce the time clinicians have to spend with patients, patient information leaflets remain an invaluable resource to facilitate the retention of important health information. The aim of this study is to analyse the current quality of patient information leaflets given to patients ahead of lumbar spine surgery in English National Health Service (NHS) Hospitals.

Methods: Patient information leaflets were sourced from the websites of NHS providers of lumbar spinal surgery. The quality of the leaflets was evaluated using the DISCERN tool, a standardized 16-item instrument designed to help the users of consumer health information judge the quality of the written information about treatment choices. Reviewers assigned each question a score on a five-point Likert scale (one for low quality with extensive shortcomings, five for a high quality with minimal shortcomings).

Results: Thirty two patient information leaflets on lumbar surgery were sourced (fusion, n=11; decompression, n=15; all lumbar procedures, n=6). Two leaflets (6%) were considered poor, 13 (41%) were marked as fair, 14 (44%) were of good quality and three (9%) were scored as excellent. The total mean score was 55 (30-74) which corresponds to good quality. The lowest scoring questions were: sources of information (Q4), balanced/unbiased (Q6) and results of no treatment (Q12). Consistently high scoring questions were: date of publication (Q5), description of treatment (Q9) and quality of life (Q13).

Conclusion: The rationale for needing high quality preoperative patient information is well-documented; however there is considerable variation in the quality of the leaflets provided ahead of lumbar spine surgery. The scope for improvement is clear, and as the move towards patient centred evidence-based care continues, it is important that hospital resources provide recommendations based upon shared decision making and evidence of clinical effectiveness.

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