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RHEUMATOLOGISTS' PERSPECTIVE ON PATIENT REPORTED OUTCOMES TO PROMOTE SHARED DECISION-MAKING IN PATIENTS WITH RHEUMATOID ARTHRITIS.

Esteban Rubio[1], Mª José Moreno[2], Adela Gallego[3], Isabel Castrejón[4], Amelia Cobo[5], Sebastián Moyano[5], Marta Comellas[6]

[1] Hospital Universitario Virgen del Rocio, Sevilla, Spain; [2] Hospital Rafael Méndez, Lorca, Spain; [3] Hospital Perpetuo Socorro, Badajoz, Spain; [4] Hospital General Universitario Gregorio Marañón, Madrid, Spain; [5] Eli Lilly and company, Alcobendas, Spain; [6] Outcomes 10, Castellon de la plana, Spain

INTRODUCTION

Rheumatoid arthritis (RA) has an important impact on patients, both in physical function and quality of life[1].

According to current RA guidelines, treatment selection should be based on a shared decision between the patient and the rheumatologist[2]. Incorporating the patient's perspective in clinical decisions through a shared decision-making (SDM)[3] is essential in patient-centered care[4] and key to optimizing long-term outcomes.

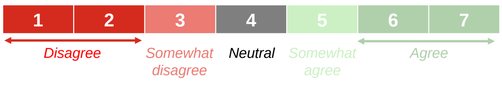
OBJECTIVE

We aim to explore Spanish rheumatologists' experience and perspective on Patient Reported Outcomes (PROs) and shared decision-making (SDM) in routine care.

METHODS

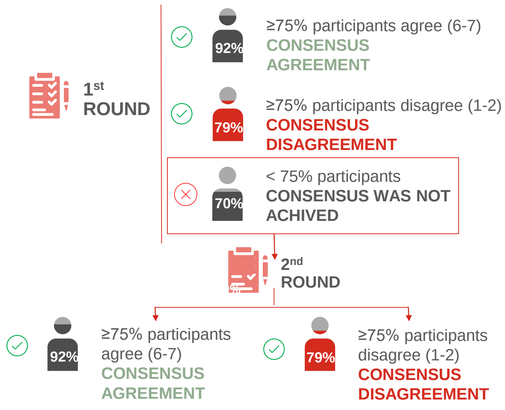
Delphi questionnaire

Panelists' perception of patient involvement and PROs' appropriateness and feasibility was assessed on a 7-point Likert scale.



Delphi rounds

Two round-Delphi were conducted.



Consensus definition

The consensus was reached when ≥75% agreed (6-7) or disagreed (1-2). Items for which consensus was not achieved were included in the 2nd round.

Scientific Committee

A scientific Committee including 4 expert rheumatologists led the project.

Delphi panelists

39 rheumatologists completed the 1st round and 33 (85% response rate) the 2nd.

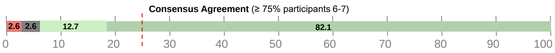
- 61.5% women
- mean age 50.3 (SD:11.0) years
- 23.1% in charge of a monographic RA clinic
- mean 18.1 (SD:9.6) years of experience

RESULTS

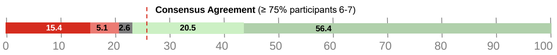
Involving patients in therapeutic decision-making

Although 82.1% of rheumatologists agreed on involving patients in therapeutic decision-making to improve adherence only 56.4% include an SDM strategy in treatment decisions.

Involving patients in therapeutic decision-making improves treatment adherence



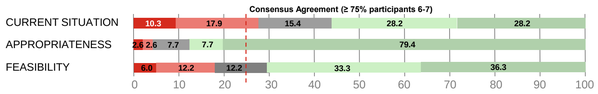
In my clinical practice, I include a shared decision-making strategy to choose the most appropriate treatment according to the patient's needs.



Use or PROs in routine care

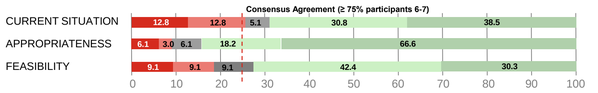
Most rheumatologists (79.4%) agreed on the importance of incorporating PROs in routine care but only 28.2% use them to assess disease activity and 36.3% considered it feasible.

I incorporate the use of PROs in routine care to assess disease activity from the patient's perspective



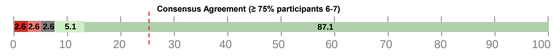
Only 38.5% of panelists incorporate the result of PROs to select the most appropriate therapy, not reaching a consensus regarding either its appropriateness (66.6%) or feasibility (30.3%).

I incorporate the information provided by the PROs to select the most appropriate therapy for the patient



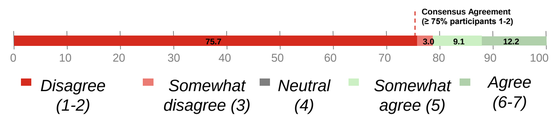
Most panelists (87.1%) agreed that the information provided by PROs should be interpreted according to patients' characteristics and comorbidity.

The information provided by the PROs should be interpreted in the context of each patient according to their clinical characteristics and comorbidity.



Panelists reached consensus (75.7%) considering that the information provided by PROs is useful not only in patients on biologics but also with conventional treatment.

The information provided by the PROs is useful only in rheumatoid patients on biologic to provide more information on treatment efficacy.



CONCLUSIONS

Panelists consider PROs useful to guide SDM in clinical practice however the actual implementation is scarce. To move toward patient-centered care, efforts should be made to enhance the use of PROs and raise awareness of their importance in optimizing outcomes.

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