

Title of Intervention: A Patient Decision Aid for Colorectal Cancer Screening

Intervention Strategies: Individual Education

Purpose of the Intervention: To increase colorectal cancer screening by educating patients about their screening options

Population: Patients aged 50 and older

Setting: Suburban health care facility in Rochester, New York; health care facility-based

Partners: Local university

Intervention Description:

- Individual Education: Patients received a short (470-word) description of colorectal cancer that included a decision model to help them “Choose the best approach to colorectal cancer screening.” The model provided six recommended screening programs for average-risk patients and six decision criteria (avoid cancer, avoid side effects, avoid false positives, frequency of screening, test preparation, test procedure). After reviewing the model, patients were asked to compare the importance of the criteria using a verbal response scale. All responses were entered into a computer program for analytical hierarchy process. The computer program analyzed the data to select the best screening option for the patient. The results were reviewed with the patients who were then urged to discuss colorectal cancer with their health care provider at their upcoming visit.

Theory: Analytic Hierarchy Process

Resources Required:

- Staff/Volunteers: Staff to conduct education sessions
- Training: Training in the analytic hierarchy process
- Technology: Computer
- Space: Meeting space
- Budget: Not mentioned
- Intervention: Decision model, analytical hierarchy process software
- Evaluation: Questionnaires, interview protocol

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - A post-intervention questionnaire assessed the patients’ understanding of the available colorectal screening options, their overall assessment of the intervention and their understanding of the major decision criteria.
 - A standardized interview conducted prior to the patients’ next health care provider visit assessed demographics, family and personal health history, past colorectal cancer screening, screening preferences, decision-making beliefs and patient knowledge about colorectal cancer and prevention.
 - A post-health care visit questionnaire assessed whether or not the patient and their health care provider discussed colorectal cancer screening, if a decision about screening was made, how the decision was made, what the decision was and amount of conflict.

Outcomes:

- Short Term Impact: Intervention group patients had lower decision conflict regarding colorectal cancer screening decisions due to increased knowledge and higher ratings of quality of the decisions they made.
- Long Term Impact: There was no difference in the rate of completed screenings.

Maintenance: Not mentioned

Lessons Learned: Not mentioned

Citation(s):

Dolan JG, Frisina S. Randomized controlled trial of a patient decision aid for colorectal cancer screening. *Med Decis Making.* Mar-Apr 2002;22(2):125-139.