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Efficacy of decision support measures in reducing decisional conflict and improving satisfaction with the decision for RRT in patients with end-stage renal disease

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Background

- ◆ In Taiwan, the number of people receiving dialysis treatment is 3,249, ranking first globally(USRDS, 2020;)
- ◆ Understanding treatment options and their associated outcomes is critical to making treatment decisions consistent with individual values and preferences. Research has shown that ESRD patients often feel unprepared, lack relevant information about RRT, and choose to rely on their physicians to make the RRT decision (Ya-Fang et al., 2020).
- ◆ Some patients even feel that they lack the right to choose and are afraid to express their preferences. When patients choose dialysis treatment, their physician and family preferences often take precedence over their preferences (Ladin et al., 2017; Woo & Pieters, 2020).



Purpose

- ❖ The study aimed to investigate the efficacy of a nurse-led decision support intervention on improving decision satisfaction in patients with end-stage renal diseases.



Methods_1

◆ Research Design :

- This study adopted a parallel 1:1 randomized controlled study design.
- Number of samples: A total of 68 patients were collected

◆ Setting and participants :

- Patients who met the eligibility criteria were recruited from the nephrology clinic of a medical center in northern Taiwan.

◆ Intervention and control conditions :

- The intervention consisted of two main components, decision aid, and decision guidance. The RRT decision eBook as an RRT decision aid. The decision guidance mainly focuses on three-talk model, including team talk, options talk, and decision talk.
- The control group received an RRT health education manual and a brief patient education.



Methods_2

◆ Data collection :

- Data were collected using self-report questionnaires in both groups.
- The study questionnaires included questions for demographics and decision satisfaction . Data on disease and treatment variables were collected from patients' medical records, including serum creatinine level, glomerular filtration rate (eGFR), comorbidities, and time to receive first RRT (days).

◆ Outcome measures :

- The Satisfaction with Decision (SWD) scale (Holmes-Rovner, 1996) measured the subject's satisfaction with the RRT decision.
- The scale contains six items. Each item is scored on a Likert scale from 1 (strongly disagree) to 5 (strongly agree). Higher scores indicate greater satisfaction with decisions. .



Results_1

◆ Participant's characteristics and baseline equivalence :

- The subjects' average age was 56.72 years old. Majority of them were male (n = 47, 61.8%), married (n = 54, 71.1%), religious (n = 58, 76.3%), and lived with their family (n = 67; 88.2%), and with a college and above level of education (n = 34, 44.8%). The subjects' average serum creatinine level was 9.94 mg/dl (SD = 2.02) and their average GFR was 7.0 ml/minutes/1.73 m² (SD = 1.92).

◆ Effects on decision satisfaction :

- Effects on decision satisfaction One month after receiving RRT , the average decision satisfaction score for the experimental group [90.59, (SD = 4.89)] was significantly better (MD=8.63; 95% CI =4.70~12.56) than that for the control group [(81.96 points (SD = 10.38)]. The results indicated greater decision satisfaction in the experimental group than in the control group.





Results_2

- Our study results support that interventional measures can effectively improve the treatment decision satisfaction of ESRD patients. One month after receiving RRT, the satisfaction level in the experimental group was significantly higher than that in the control group.
- Previous studies reported similar findings (Chabrera et al., 2015; Verberne et al., 2019). Whereas most previous studies assessed immediate satisfaction, our study assessed satisfaction one month after treatment.
- These strategies enhance communication, provide patients with multiple learning opportunities, and help clarify values and preferences, thereby increasing patient satisfaction



Conclusion and Implication for Practice

- The study findings support that the nurse-led decision support intervention can effectively improve ESRD patients' decision satisfaction. The decision support intervention based on a mobile e-book as a decision aid was developed to optimize the healthcare environment for patient decision-making.
- Leaders should be able to grasp the trends of future development of nursing information and guide leadership teams to create substantial benefits to clinical care from the perspective of innovative change.



Thank you for you attention



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