



Title	Shared Decision-Making Programs: A Descriptive Analysis of VA Experiences and A Systematic Review of the Evidence of Shared Decision-Making Programs for Prostate Care
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Aim

To evaluate the effectiveness and use of shared decision-making programs (SDP) for prostate disease.

Conclusions and results

A comprehensive search of the peer-reviewed published literature resulted in 3 relevant articles. These studies used SDP in benign prostatic hyperplasia (BPH), prostate specific antigen (PSA) screening, and prostate cancer. Patients with BPH who used SDP were more knowledgeable about their condition, more satisfied with the decision-making process, and showed less deterioration in their perceived general health and physical functioning than patients who received an informational brochure. In addition, patients responded favorably to SDP and reported that the program was clear, balanced, had the right amount of information, and was the right length. Patients using SDP for PSA screening were more knowledgeable about prostate cancer and screening, more likely to prefer watchful waiting, less likely to plan to have PSA screening within the next 2 years, and had less PSA screening at the next episode of care. Patients with prostate cancer who used SDP were willing to face uncertainty regarding treatment choices and actively shared in the decision-making process. The importance of patient preference in decision making was demonstrated.

Recommendations

Shared decision-making programs support patient involvement in health care, are well received by patients, and can be used with a wide range of patients.

Methods

A comprehensive literature search was conducted using MEDLINE, PREMEDLINE, HealthSTAR, EMBASE, Cinahl, and CancerLit from 1966 through 1997. Search strategies included the following terms: patient participation, decision making, shared decision making, prostate, prostatic hyperplasia, benign prostatic hyperplasia, and prostate neoplasm. The search included original research

with clearly described methods published in English. Expert opinion was also obtained from representatives of the Foundation for Informed Medical Decision Making, VA providers, and researchers with extensive experience using SDP.

Further research/reviews required

Future research is needed to assess the long-term impact of SDP on the cost and quality of health care.