



AMERICAN ACADEMY OF FAMILY PHYSICIANS

F O U N D A T I O N

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Simple Visual Natural Frequency-Based Shared Decision-Making Aids for Patient and Physician in the Pre-diabetes Office Visit (G1101)

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Abstract

Effective patient-physician communication which includes informed activated partners in care is an essential component of the patient-centered medical home. With electronic health records (EHR), specific communication with patients about their disease risk is likely to become increasingly more available. Visual natural frequency-based decision-making aids (DMAs) are designed to assist the family physician and patient in making efficient, parallel, and value-based decisions that take into consideration real and easily interpreted benefit and harms of available medical and lifestyle interventions. Pre-diabetes is a common condition that may be under-recognized and managed by family physicians.

The objective of this study is to test a simple DMA amongst family physicians and their patients with pre-diabetes. Patients ages 18-90 will be selected with random or fasting blood glucose, 2h glucose tolerance tests, or hemoglobin A1C's in the pre-diabetes range. Patients will fill out a questionnaire after a planned pre-diabetes visit with their family physician without and with use of the DMA. Physicians will complete a questionnaire prior to and then after training and use of the DMA with their patients.

Descriptive data for patient and physician participants will be reported. Statistical methods will be used to assess change after the intervention treatment for both patients and physicians concerning knowledge of the risks of pre-diabetes and the benefits of lifestyle intervention, changes in patients' perceived communication effectiveness, decisional conflict, self efficacy, and intent for healthier lifestyle adoption. The use, perceived value, and feasibility of the DMA from the physicians' perspective will be reported.