Shared Decision Making: A Communication Practice Proven to Enhance 
Adult Asthma Patients’ Adherence and Outcomes 

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Outline

A. Shared treatment decision making: what it is and what it isn’t 
A. The four defining features of SDM\textsuperscript{1,2} are that BOTH the patient and physician:
   (a) Are involved in the decision-making process 
   (b) Share information with each other 
   (c) Take steps to participate in the decision process by expressing treatment preferences 
   (d) Agree on the treatment to implement 

B. Ways in which SDM differs from but can be used in conjunction with other intervention strategies to improve treatment adherence: 
   (a) monitoring/self-monitoring 
   (b) patient self-management education 
   (c) motivational interviewing 

B. Evidence regarding the effects of shared treatment decision making 

1. A 2008 review of randomized controlled trials identified 11 that met at least one of Charles and Gafni’s criteria, though none focused on asthma, and no trials included all of the key features of SDM.\textsuperscript{3} 

2. The Better Outcomes of Asthma Treatment (BOAT) study (Wilson et al., 2010) -- a 3-arm multisite randomized controlled trial in 612 patients with poorly controlled asthma that compared Shared Treatment Decision Making (an intervention that incorporated all four defining features) with Usual Care (no intervention) and with Clinician Decision Making (an active control condition identical to the SDM intervention except for the process by which treatment was determined).
   (a) Sample: inclusion and exclusion 
   (b) Intervention and control conditions - overview 
   (c) Assessment and follow-up. 
   (d) Results – the effects of SDM on: 
      1) Patients’ perception of their role in treatment choice 
      2) The strength of the regimen chosen 
      3) Medication adherence and clinical outcomes (see Handout 1) 
      4) Basic elements of the BOAT SDM intervention 
         (a) Intervention protocol: Script, interventionist aides/worksheets, patient handouts 
         (b) Flow chart of the initial (primary) session
C. **Key tools in the BOAT intervention that ensure that shared decision making occurs** (see Handout 2)

1. *Patient Information Form*

2. *Asthma Control Dial*, with and without medical criteria*


4. *My Asthma Treatment Goals and Features of Asthma Medications*: worksheet to elicit patient goals and priorities

5. *Medication Planner*: worksheet for considering alternative treatment regimens in relation to the patient’s priorities and goals.

6. *Asthma Management and Action Plan*

D. **Adaptation and implementation of the BOAT SDM intervention in primary care**

1. Translating research findings into clinical practice is a major challenge to improving the quality of healthcare delivery. Shared decision making (SDM) has not yet been widely adopted by health providers.

2. Dulin and Tapp at the Carolinas Health Care System have used a participatory approach to update and adapt the BOAT SDM asthma intervention to primary care practices largely serving low income African Americans and Latinos, and to children as well as adults. The evaluation design and the results of the initial implementation process in 6 clinics have been reported. In a further study, three approaches to further implementation of this intervention are now being evaluated in 30 CHCS Medicaid clinics. [http://pfaawards.pcori.org/node/20/datavizwiz/detail/40695](http://pfaawards.pcori.org/node/20/datavizwiz/detail/40695)

*Used in both the SDM and active control (CDM) protocols. Non-asterisked items were used in the SDM protocol only.*
Bibliography


5. Tapp H, Hebert L, Dulin MF. Comparative effectiveness of asthma interventions within a practice based research network. *BMC Health Services Research* 2011, 11:188.