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Patient-Provider Communication about Multiple Sclerosis: The MS-SUPPORT Decision Aid

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IMPLICATIONS

More than 50% of patients strongly agree that the information provided by the MS-SUPPORT tool was trustworthy, helped prepare them for their doctor visit and improved their understanding of the importance of adherence

MS-SUPPORT appears to improve communication from the perspective of HCPs but not patients, though those who completed more of the tool had higher COMRADE scores

INTRODUCTION

- Clinical guidelines recommend incorporating patient preferences into decisions about disease modifying treatments (DMTs) for multiple sclerosis (MS)¹
- Effective patient-provider communication is essential to shared decision-making about treatment

OBJECTIVE

- To test the impact of a shared decision-making tool on patient-provider communication in MS

INCLUSION CRITERIA

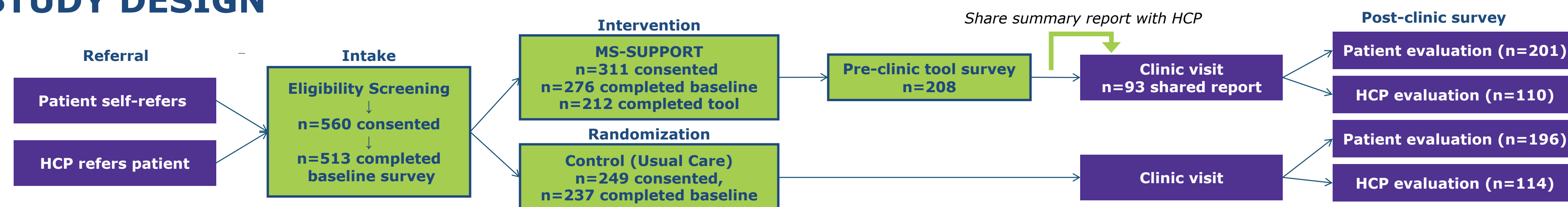
- Patients:**
- Adults with relapsing MS
 - MS clinic appointment
 - Web access

- Referring HCPs:**
- Neurologist, PA, RN, or NP
 - MS focus

METHODS

- Randomized controlled trial (RCT):** MS-SUPPORT vs usual care
- Patients referred from the MSAA and 31 HCP sites across the US
 - Screening, consent, intervention, and follow-up performed online

STUDY DESIGN



OUTCOME MEASURES

Communication: COMRADE² assesses communication and confidence. Range: 0-100; higher is better.

Decisional Conflict:³ "Do you feel SURE about the best choice for you?"; "Do you know the benefits and risks of each option?"; "Are you clear about which benefits and risks matter most to you?"; "Do you have enough support and advice to make a choice?"

Decision quality: "My treatment plan is helping me achieve my treatment goals"; "My treatment plan reflects what's important to me..."

Role Preference:⁴ "I prefer to make the decision about which treatment I will receive"...; "I prefer that my doctor and I share responsibility for deciding ..."; "I prefer to leave all decisions regarding treatment to my doctor"

THE INTERVENTION: MS-SUPPORT

MS-SUPPORT is an online tool that includes a series of passages and surveys for patients to read and complete

- Developed using a systematic patient-centered process
- Assesses patient goals and preferences
- Fills key knowledge gaps, misconceptions, and barriers to shared decision-making
- Generates individualized reports that can be shared with HCPs (print, email, portal)

MS-SUPPORT online tool example images and report



RESULTS

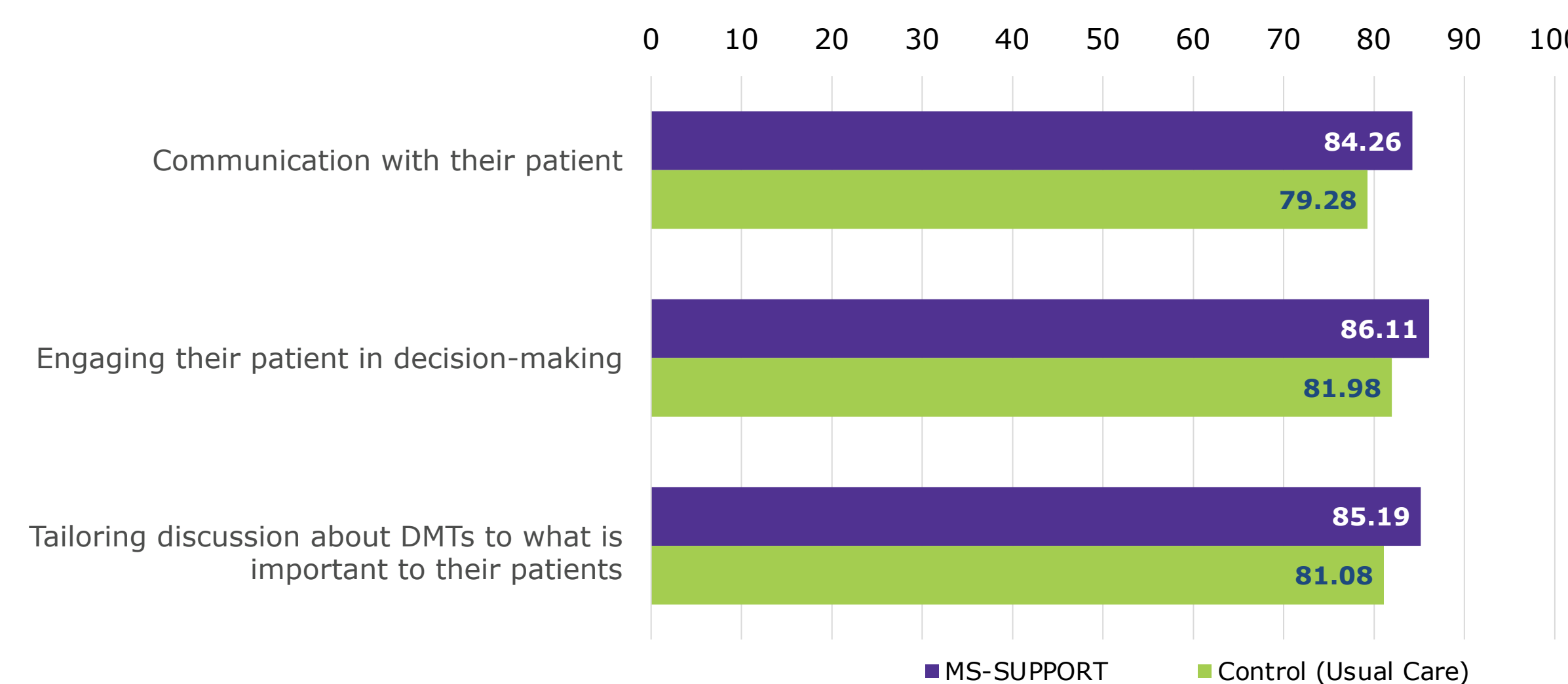
Characteristics of Participating Patients, n (%)

Patient Characteristic (n=513)	MS-SUPPORT (n=276)	Usual Care (n=237)
Age, <55 years	186 (67.4%)	158 (66.7%)
Gender, female	237 (85.9%)	197 (83.1%)
Race, White/Caucasian	224 (81.2%)	203 (85.7%)
Education, < college grad	88 (31.9%)	65 (27.4%)
Type of MS, relapsing MS	252 (91.3%)	218 (92.0%)
Duration of MS ≥3 y	236 (85.5%)	202 (85.2%)
Current DMT use	213 (77.2%)	195 (82.3%)

Patient Evaluation of the MS-SUPPORT Online Tool (before clinic visit, n=212)



HCP-reported Communication, % reporting as excellent:



	MS-SUPPORT		Control (Usual Care)		P-value
COMRADE	Mean	SD	Mean	SD	
Communication	68.53	11.75	67.66	12.64	0.84
Confidence	71.34	10.38	73.06	8.54	0.30

Patient evaluation of MS-SUPPORT just after completion (n=212):

- 85% (n=180) reported it would help them talk to their HCP
- Patient-reported communication during the clinic visit:**
 - Both patient groups reported excellent communication scores
 - Patients who completed MS-SUPPORT and shared their report had better communication scores (90.0 [SD 10.9]) than non-completers (86.7 [SD 16.8])*

HCP-reported communication during the clinic visit:

- HCPs seeing patients in the MS-SUPPORT (versus control) group were more likely to report as "excellent":
 - Communication with their patient*
 - Engaging their patient in decision-making*
 - Tailoring discussion about DMTs to what matters to their patients*

Decision quality:

- "My treatment plan is helping me achieve my treatment goals"
 - Increased more with MS-SUPPORT versus control (0.23 vs. 0.06, p=0.156)
- "My treatment plan reflects what's important to me ..."
 - Increased more with MS-SUPPORT versus control (0.23 vs. 0.02; p=0.119)

Role preference:

- Patients receiving MS-SUPPORT were more likely to shift towards a more active, participatory role compared to controls (delta 0.50 vs. 0.44, p=0.53*)

*differences not statistically significant

LIMITATIONS

- High scores among controls, with improvement over time, suggest that selection bias and response bias affected our findings

NEXT STEPS

- Assess impact of MS-SUPPORT on treatment choice and adherence at 1 year follow-up
- Explore dissemination options



SCAN FOR FULL AUTHOR DISCLOSURE DETAILS



Abbreviations: DMT, disease modifying therapy; HCP, healthcare provider; MS, multiple sclerosis; MSAA, Multiple Sclerosis Association of America; RCT, randomized controlled trial; SD, standard deviation | **References:** 1. Rae-Grant A, et al. Practice guideline: Disease-modifying therapies for adults with MS. *Neurology*. 2018;90(17):777-88. 2. Edwards A, et al. The development of COMRADE--a patient-based outcome measure to evaluate the effectiveness of risk communication and treatment decision making in consultations. *Patient Educ Couns*. 2003;50(3):311-22. 3. Legéré F, et al. Are you SURE? Assessing patient decisional conflict with a 4-item screening test. *Can Fam Physician*. 2010;56(8):e308-14. 4. Degner LF, et al. The control preferences scale. *Can J Nurs Res*. 1997;29(3):21-43. | **Acknowledgments:** This study was sponsored by the Multiple Sclerosis Leadership and Innovation Network (MS-LINK) funded by EMD Serono, Inc., USA (an affiliate of Merck KGaA, Darmstadt, Germany), who reviewed and provided feedback on this poster.