

New decision aid for treatment of herniated disc beneficial

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A new patient decision instrument meets the criteria of acceptability, reliability, and validity, and improves the quality of patient decision-making for treatment for a herniated disc, according to a study published in the Aug. 15 issue of *Spine*.

(HealthDay)—A new patient decision instrument meets the criteria of acceptability, reliability, and validity, and improves the quality of patient decision-making for treatment of a herniated disc, according to a study published in the Aug. 15 issue of *Spine*.

Karen R. Sepucha, Ph.D., from Massachusetts General Hospital in Boston, and colleagues developed and evaluated a [herniated disc](#)-decision quality instrument (HD-DQI). The instrument generates two scores—a total knowledge score and a concordance score—each scaled 0 to 100 percent, with higher scores indicating better quality.

The researchers found that the HD-DQI survey was feasible for implementation and acceptable to patients. There were good response rates and limited missing data. The knowledge score was able to differentiate significantly between patients who had seen a decision aid or not (55 versus 38 percent) and between providers and patients (73

versus 46 percent). There was also good retest reliability (intraclass correlation coefficient, 0.85) with the knowledge score. The majority of patients (78 percent) were given treatments that matched their goals, and these patients were significantly less likely to regret their decision than those whose treatments did not match their goals (13 versus 39 percent).

"The HD-DQI met several criteria for high-quality patient-reported survey instruments," the authors write. "More work is needed to examine acceptability for use as part of routine patient care."

More information: [Abstract](#)
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