

Randomised trial of a computer-generated tailored written education package for patients following stroke

(T. Hoffmann et al. Age and Ageing 2007; 36: 280-286)

Abstract

Background: the ideal method of providing stroke patients with information has not been established.

Objectives: to evaluate the effectiveness of providing stroke patients with computer-generated tailored written information.

Design: randomised controlled trial with blinded assessor.

Setting: acute stroke unit.

Participants: 138 stroke patients.

Methods: patients were randomised to receive either computer-generated tailored written information about stroke or generic written information while being treated. Three months following discharge, a blinded assessor evaluated the outcomes of knowledge about stroke, self-efficacy (Self-Efficacy to Perform Self-Management Behaviours Scale), anxiety and depression (Hospital Anxiety and Depression (HAD) Scale), perceived health status (COOP charts), satisfaction with content and presentation of the written information received (separate 10-point visual analogue scale for content and presentation), and desire for additional information.

Results: complete data were obtained for 133 (96.4%) patients. Patients in the intervention group were significantly more satisfied with the content (difference on a 10-point visual analogue scale was 1, 95% confidence interval 0.4 to 1.7, $P = 0.003$) and presentation (difference on a 10-point visual analogue scale was 1.2, 95% confidence interval 0.6 to 1.9, $P < 0.001$). Significantly, fewer patients in the intervention group desired additional information about stroke at follow-up than patients in the control group (4.5% versus 32.8%; $P < 0.001$). Anxiety change scores improved slightly more in favour of the control group (1.4 difference on the HAD subscale, 95% confidence interval 0.2 to 2.8, $P = 0.03$). No significant differences between the groups were observed for any of the other outcome measures.

Interpretation: providing stroke patients with computer-generated tailored written information improved satisfaction with the information that was received and was more effective in meeting patients' informational needs than non-tailored information, but had no effect on knowledge about stroke, self-efficacy, depression, or perceived health status.