BACKGROUND

Patient activation may improve adherence by equipping patients with skills and knowledge about their disease.1 There is evidence of a positive relationship between activation and quality of life in IBD patients.2 However, the impact of a tailored patient activation intervention (PAI) among this group of patients has not been investigated. Activated patients are motivated to be partners in managing their health and would most likely remain in remission for longer periods (in the case of IBD patients).

STUDY VARIABLES

METHODS

A pre-test, post-test, control group design

• Inclusion criteria:
  • Adult IBD patients (> 18 years) who were patients of the study clinic site
  • Patients with moderate to severe Crohn’s disease/ulcerative colitis on immunomodulators (methotrexate or azathioprine) or biologic therapy (adalimumab, infliximab, certolizumab, or vedolizumab)
  • Patients who had office visits scheduled from April to August
  • Patients with moderate to severe Crohn’s disease
  • Stage 4 (as determined by patients’ stage which consisted of an information booklet and lifestyle management strategy that focused on the confidence, skill, and knowledge of the intervention group patients in managing their health and would most likely remain in remission for longer periods)

• Exclusion criteria:
  • Children (17 years or younger) with IBD
  • Patients who did not have moderate to severe Crohn’s disease or ulcerative colitis; and
  • Patients with recent surgical intervention or hospitalization for a non-IBD related disease.

Convenience sample categorized patients into four of one patient activation stages based on the 13 item patient activation measure (PAM-13) at baseline.

• Intervention group (N=23) were given a physician-led, tailored PAI based on their stage which consisted of an information booklet and focused discussion
• Control group (N=27) received usual care.

For those who completed both surveys (N=20 intervention group and N=21 control group), baseline PAM scores were compared to 5-month post-intervention PAM scores for changes in patient activation score, medication adherence, and satisfaction with medical care using Chi square and T tests (p<0.05).

RESULTS

The difference in pre vs post intervention patient activation scores for patients that received the intervention was almost five points higher than that of patients in the control group.

DISCUSSION

The small sample size likely contributed to the statistical non-significance of this result. However, this finding suggests that the tailored patient activation was successful in increasing patient activation. This implies that the confidence, skill, and knowledge of the intervention group patients actively managed their health increased.

CONCLUSIONS

This study showed that a tailored patient activation intervention via education and focused physician-patient interaction had an impact on the patient activation levels of IBD patients; particularly on females, Caucasians, Crohn’s disease patients, and patients in remission within the intervention group.

There were no significant changes pre to post intervention with regards to medication adherence and satisfaction in both study groups. Tailored PAIs have the potential to provide customized medical care to patients (especially those with chronic conditions) and to involve them in their disease management, leading to improved health outcomes.

REFERENCES


CONTACT INFORMATION

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The Effect of a Tailored Patient Activation Intervention in Inflammatory Bowel Disease (IBD) Patients – A Pilot Study
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