61. USE OF AN OSTEOARTHRITIS GUIDEBOOK TO HELP PROVIDE SUPPORTED SELF-MANAGEMENT IN PRIMARY CARE: A QUALITATIVE EXPLORATION OF ACCEPTABILITY FOR PATIENTS AND PROFESSIONALS

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Background: OA is one of the most frequent reasons for primary care consultations in older adults, but patients often leave thinking that little can be done, and have received limited written information or treatment options. Written information can be of benefit to both practitioners and patients and the provision of quality information is emphasized as a core intervention by National Institute of Clinical Excellence (NICE) OA guidelines. Researchers, patients and HCPs developed an OA guidebook to provide: (a) a balanced source of information for patients; (b) a resource to aid practitioners when discussing self-management. This study aimed to evaluate the acceptability and usefulness of the new OA guidebook as part of the Management of Osteoarthritis in Consultations Study: the development and testing of a complex intervention in primary care (MOSAICS).

Methods: The MOSAICS intervention comprises a series of consultations with GPs and practice nurses in which supported self-management is offered to patients. Eight practices in the West Midlands and North West of England were recruited to take part: four control practices and four intervention practices. Semi-structured interviews were undertaken with patients (n = 29), GPs (n = 9) and practice nurses (n = 4) from the intervention practices to explore experiences of the intervention and use of the guidebook. Data were analysed using thematic analysis and constant comparison of data within and across interviews.

Results: GPs thought the guidebook helped provide patients with information about OA aetiology, prognosis and self-management. Thus, it backed up key messages they provided patients during consultations. GPs also found the guidebook helped them close off consultations. Nurses also thought the guidebook helped them describe OA disease processes in consultations. However, Nurses described how they turned to other resources as a basis for discussing specific muscle strengthening exercise advice to facilitate supported self-management. Patients viewed the guidebook as a long term resource they could refer to as needed. They valued the explanations of disease onset, process and prognosis contained within the guidebook. Patients also appreciated the information drawn from real people and real-life situations. This was useful in two ways. First, it helped to make suggested self-management strategies seem more tangible. Second, a sense of inclusion and comfort was obtained from knowing other people had similar problems and feelings.

Conclusion: An OA specific written information guidebook was deemed acceptable and useful to practitioners alike as part of the MOSAICS study. Small modifications could be made regarding exercise advice. Additional research to trial the effectiveness of the guidebook as a stand-alone tool may be needed. The guidebook will need updates as new revisions to NICE OA guidelines are made.

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