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INFORMATION IN MEDICAL TREATMENT COURSES - A STEERING TOOL FOR THE QUALITY – A Pilot Study

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Background Unintended events and suboptimal treatment with medicines is a major burden for patients and health systems all over the world. Traditionally, patient safety has been viewed as the absence of errors, but another approach focus on learning from situations that goes well – also called resilience or Safety-II. This, combined with a broad understanding of quality, is the platform for this study.

Objectives The overall purpose of this three-phased study is to investigate how information is used as a steering tool for quality in medical treatment courses. In the first part of the study, we analyze the role of information on medicine in relation to the quality of medical treatment courses.

Methods The study investigate patient-medication as a process focusing on variability. Systems theory and cybernetics concepts (steering, timing and feedback) as well as a classic communication model is applied as theoretical frame. Two groups of patients and their information providers will be studied using qualitative methods. In the first phase, informants were interviewed about their use of medicines information, using a semi-structured interview guide. The interviews were fully transcribed. The qualitative data analysis focused on the aspects most relevant for the patients concerning their use of medicines information, including everyday use of medicines information and sources, actions in case of side effects/treatment-related incidents and use of network and health
system in search for information during medical treatment. The patient’s feedback to health personnel were also discussed.

**Results** Seven patients using either chronic pain medication or anticoagulants participated. They were recruited from GPs, hospital outpatients clinics, pharmacies and patient organizations, and differed in age, sex, education, duration of disease, geography, co-morbidities, marital status and socio-economic relations. The data-analysis is ongoing. Preliminary results show that patients seem to take an active role in their use of, and feed-back on, medicines information. However, the extent varied among individuals. The patients’ relations to health providers seemed important for their use of medicines information and this aspect needs further analyzing.

**Conclusions/clinical implications** The results of this pilot study will form a base for further studies of patterns identified to have a role for medication safety and quality of treatment courses. The overall project results may provide health professionals with an insight into how patients’ knowledge and experiences can be used more systematically to increase the quality of medical treatment.

**Keywords** - Exchange of information and knowledge sharing across sectors/domains - Medicines - Patient communication - Quality
- Patient safety
- Safety-II
- Resilience
- Systems theory
- Feed-back