

Health information: where do patients obtain it and why does it matter?

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While most agree that it is important for patients to have information about their health, and population based surveys of the Australian public show that General Practitioners (GPs) remain the most frequent health information source, people are increasingly exposed to health information from mainstream media sources such as the Internet and television.^{1,2} The quality and accuracy of that information can have a major impact on patient awareness and compliance, and in broader terms affect delivery and access to effective health care, as well as the development of health care policy.^{3,4} This RESEARCH ROUNDup explores recent reports about the ways in which Australians obtain health information, the quality of that information, and reviews the responsibility of GPs in responding and contributing to that information.

The Medical Journal of Australia recently published a perspective on the importance of the quality of Australian health journalism, noting that the recent loss of experienced health journalists should be an issue of concern for the health sector. 4 Jordens states that "good journalism is a bulwark against both industry and state influence over media content and agendas", exposing issues that powerful interests might prefer hidden. But it also shapes the public's understanding of health, illness and disease, and importantly their expectations about treatment and services.⁵ At the patient level GPs are often faced with patient concerns based on their search for information or exposure to unsolicited health information. This can have potentially negative or positive effects on the delivery of primary health care as illustrated below.

According to a Heart Foundation survey of Australians prescribed lipid modifying medication for abnormal cholesterol, the controversial 'ABC Catalyst' television broadcast in 2013 on use of lipid lowering medication had a major impact on patient compliance. 6 In that survey, an estimated 22% of those who either watched or heard/read about the ABC Catalyst program changed their medication adherence and 9% completely stopped taking their medication. This was despite one in four of those patient groups having previously had a heart event and therefore being recognised in evidence based practice guidelines as a high risk patient for whom anti-lipid treatment is highly recommended. 7 On the other hand, news coverage of Kylie Minogue's breast cancer diagnosis at the age of 36 years prompted a 40% increase in overall bookings for breast cancer screening, and a 101% increase in bookings among non-screened women in the age group 40-69 years.8 While there remains debate about the merits or otherwise of broadly based breast screening and some of the women who sought screening on this occasion are likely to have had a low risk of disease, the impact of media coverage is indisputable. Both of these cases emphasise the powerful influence exerted by media representations of health issues. So where do Australians look for health information?

Information sources and quality

When seeking health information Australian patient sources vary depending on factors such as age, level of education and socioeconomic level but for all groups the top sources include GP, pharmacist, family and friends, Internet, and TV, and to a lesser extent print based media such as newspapers and magazines. 1,2,9 Despite variations in survey methods and patient

characteristics, face-to-face consultation with a GP consistently rates as the main source of health information. 1,2,9 However, readily accessible mainstream media forms such as Internet, TV and print based media provide patients with 24/7 access to health issue information, with responses often made more powerful by the association with celebrity as illustrated above. Therefore it is of concern that an analysis of 2004-08 media reporting of health interventions in Australia concluded that despite some improvement the overall quality of medical news reporting was poor. 10 Further, an analysis of Australian media reporting on screening and diagnostic tests, found that only a minority of publications include comment from an independent expert and the quality of reporting varies from irresponsible to exemplary. 11 Encouragingly, recent studies show some improvements, for example, the quality of reporting about dementia has improved in terms of 'sensationalism', 'language', and 'provision of information about help services'. ¹² And a 2010 expert panel analysis of information sources about mental disorders found that the commonly accessed Wikipedia content (at least for this subject) is generally as good as, or better than, many of the more recognised sources including textbooks and centrally controlled websites.13

GP responses to patient held health information

Failure to listen to patient held health information could have the effect of damaging the doctor-patient relationship. However, a 2009 Australian study across eight different health professional groups found that approximately 75 of 88 GP respondents (86%) actually recommended websites to their patients. ¹⁴ The websites most frequently recommended by GPs were HealthInsite (now healthdirect), beyondblue, and Diabetes Australia, whilst Better Health Channel from the Victorian State Government was frequently recommended by other health professionals. For patients seeking their own sources of Internet health information, GPs can provide guidance by advising patients to 'surf' carefully, and alert them to guidelines such as those from the National Prescriber Service (NPS) providing a checklist of five questions for deciding which sites are likely to provide reliable information <nps.org.au>, and to certification systems such as HONcode that aim to ensure quality, objectivity and transparency of medical information <hon.ch>. Ensuring that recommendations are not unduly influenced by commercial interests such as pharmaceutical companies is part of the GP's responsibility. 15 Further, GPs can increase awareness of Consumer Health Organisations (CHOs), through which patients have access to a variety of support options including Internet,



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newspapers, educational activities and other resources. Although the partial funding of many CHOs by industry organisations potentially raises the issue of conflict of interest, these sites provide those in need with more than information about treatment options.

Journalist and expert responsibility

The attraction of popular media is in part due to the use of simple language to present often complex medical conditions in terms that are easily understood by lay people; and the ease of access to information. Patient health literacy levels vary but at the lower end it impacts negatively on overall health status, increasing the demand for easy to understand health information (see *RESEARCH ROUNDup* Issue 19 at <ph>phoris.org.au/researchroundup>. However, all journalists (and content writers) have a responsibility to ensure that factors such as the need to capture the attention of their audience and interaction with commercial parties do not result in unintentional harm. ^{5,16} Increased collaboration with health experts provides opportunities to improve the quality of health journalism. ⁴

The Australian Science Media Centre (ausSMC, <smc.org.au/>), publishes critiques of mainstream health and science media stories and controversial research announcements, relying on contributions from experts in the field to provide objective and informed assessments that can be used by journalists, and also accessed by the public. They provide an opportunity for experts including GPs to contribute much needed evaluation of health information. These efforts are further supported by critiques and comment from smaller operations such as The Conversation <theconversation.edu.au>, and Croakey <blogs.crikey.com.au/</p> croakey>. The UK National Health Service-funded Behind the Headlines <nhs.uk/news/Pages/NewsIndex.aspx> also strives to provide an unbiased analysis of health-related stories based on evidence, and challenging media presentations of health news. Health care experts need to make themselves available to media in order to achieve a balance in reporting. Published insights into Australian television and media reportage on health and medicine provide invaluable preparation for that role.

Ultimately GPs have little control over the sources of health information accessed by their patients. However, in view of the influence of mainstream and social media it would seem prudent to consider how to respond to this information before the patient enters the room. GPs remain as the most sought after source of information, and this position can be used to promote a culture of informed 'surfing' and responsible reporting. Educating the end user and arming them with usable criteria to make their own judgement regarding the reliability of health information sources encourages patient participation in their own health.

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