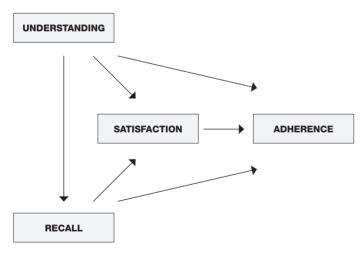
Remembering what the doctor said: use of Patient Information Leaflets given during O&G consultation

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Women consulting with O&G specialists are frequently in situations where important decisions must be made. These women receive detailed information on illness, treatment options and prognosis. Memory of medical information is therefore essential to understand recommended treatment. Ley's model (figure 1) of effective communication in medical practice highlights the importance of memory, understanding of information and satisfaction with treatment. It is estimated that 40-80% of medical information provided by healthcare workers is forgotten immediately. The greater the amount of information provided; the smaller the proportion correctly recalled.

Figure 1. Ley's model on the interaction between patient-related factors and therapy adherence.¹



The benefits of Patient Information Leaflets (PILs) have been widely studied and several investigators have suggested that PILs are helpful for patients, as they improve recall of what was discussed during consultations. ^{4,5} They are most commonly used to assist patient understanding of the disease process, drug treatments,

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invasive procedures, screening tests and cancer. PILs should back up what the physician says and should not be used as a substitute for oral information – which is preferred by the majority of patients. The patient profile should be considered before handing out information leaflets. Furthermore, doctors should check that patients actually want written information: some will not read them and may discard them, while others require sufficient detail to meet their needs. A quality PIL should contain the following:

- Based on the latest evidenced-based medicine
- Declares the objectives of the PIL
- Explains causes, consequences and usual course of the disease
- Explains the risks and benefits of treatment
- Gives advice on what to do if treatment is missed including where to consult
- Written so that it personally addresses the reader and is culturally appropriate
- Contains easy-to understand illustrations
- Names the person who wrote leaflet and their position
- States the date of writing or last update

Conclusion

Patients can be helped to remember medical information by use of categorisation techniques. Spoken information is often best supported with written or visual information. PILs that are well written and appropriate to the patient profile can improve patients' knowledge and satisfaction of a clinical situation.

References

- Ley P, Communicating with Patients: Improving Communication, Satisfaction and Compliance. New York: Croom Helm, 1988.
- 2. Kessels RPC. Patients' memory for medical information. J R Soc med 2003; 96: 219-222.
- 3. McGuire LC. Remembering what the doctor said: organisation and older adults' memory for medical information. Exp Aging Res 1996;22: 403-28.
- 4. Susteric M, Jeannet E, Cozon-Rein L et al. Impact of information leaflets on behaviour of patients with gastroenteritis or tonsillitis: a cluster randomised trial in French primary care. J Gen Intern Med 2013; 28: 25-31.
- 5. Arthur VAM. Written patient information: a review of the literature. J Adv Nurs. 1995; 21: 1081-1086.
- Raynor DK, Blenkinsopp A, Knapp P et al. A systematic review of quantitative and qualitative research on the role and effectiveness of written information available to patients about individual medicines. Health Technol Assess. 2007; 11: 1-160.
- 7. Susteric M, Gauchet A, Foote A, Bosson LJ. How best to use and evaluate Patient Information Leaflets given during consultation: a systematic review of literature reviews. Health Expectations 2017; 20: 531-542.