Communicating about cardiovascular disease risk to patients with psoriasis: A content analysis of primary health care screening consultations

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OBJECTIVES: Evidence suggests that moderate to severe psoriasis is associated with cardiovascular disease (CVD). Whilst debate concerning the nature of this relationship continues, it is recognised that people with psoriasis are more likely to have CVD risk factors linked to poor lifestyle, such as smoking, high BMI and physical inactivity.

The ways in which information about CVD risk is presented to patients by health professionals is likely to influence patients’ perceptions of risk magnitude and their response such as modification of lifestyle behaviours to reduce such risks.

Little is known about the specific methods used during CVD screening consultations to communicate risk. The aim of this study was to examine current methods used by primary care practitioners when undertaking CVD screening consultations.

METHODS: CVD risk screening consultations between practitioners (general practitioners and practice nurses) and patients with psoriasis were audio-recorded (with consent) as part of a research programme in primary care practices in northwest England. The use of audio-recorded consultations allowed for observation and analysis of the consultation without the researcher being present.

A content analysis approach was used to examine transcripts of the consultations. A coding frame used to record specific occurrences of interest in consultations, such as techniques used to communicate CVD risk, and if and how support for patients’ lifestyle change was offered.

RESULTS: Early analysis based on 30 consultations across five different primary care practices suggests wide variation in how practitioners communicate CVD risk to patients. Risk communication methods included both numerical (percentages) and verbal descriptors. There was considerable variation in practitioners’ use of the contact time, with some using the screening consultation primarily to record biomedical data and others actively engaging in discussions about health promotion, and recognising and responding to specific patient cues for discussion of risk and lifestyle change.

CONCLUSION: This study has systematically examined techniques used by healthcare professionals to communicate information about CVD risk during screening consultations with patients with psoriasis. We identified significant gaps in, as well as some important examples of, effective practice. These findings will inform further research into best practice for communicating health information in such a way that patients are empowered to make lifestyle modifications to reduce CVD risk.