



Original Research

The evaluation of a question prompt list for attention-deficit/hyperactivity disorder in pediatric care: A pilot study

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Abstract

Background: Of the available treatment options for attention-deficit/hyperactivity disorder (ADHD), the use of medications remains the most controversial and it is often difficult for parents to make decisions about treatment. Provision of relevant, reliable information about treatment during consultations may help address parents' concerns about treatment options. Question prompt lists are structured lists of disease and treatment-specific questions intended for use by patients during consultations to encourage communication with clinicians. They may prove useful in empowering parents to ask questions during consultations and to make informed decisions about treatments for ADHD.

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Objectives: To evaluate the acceptability and usefulness of a question prompt list (QPL) for attention-deficit/hyperactivity disorder (ADHD) during consultations between parents of diagnosed children and their pediatricians.

Methods: Parents of children recently diagnosed with ADHD ($n = 17$) received a copy of the QPL 7 days before their child's appointment and completed questionnaires before and after their consultations to elicit: satisfaction with the consultation and QPL; situational anxiety levels; achievement of decision-making and information preferences. Pediatricians ($n = 3$) completed questionnaires after each consultation to determine the impact of the QPL on consultation flow and to ascertain their willingness to incorporate the QPL into their practice.

Results: All parents reported that the QPL helped them to ask more questions, was easy to understand and would be useful to them in future. After receiving the QPL and seeing the pediatrician, parents' anxiety decreased significantly. All described their decision-making roles as 'just right' and were satisfied with the information obtained during their consultations. All pediatricians agreed that the QPL was helpful for parents, made communication easier, and helped parents to initiate discussion about difficult topics. The QPL was not found to impede flow of the consultation. All agreed QPL provision was feasible as part of routine clinical care.

Conclusions: The QPL received strong support from parents and pediatricians and may be a useful tool in facilitating communication and shared decision-making in this setting. The findings warrant further investigation in a larger randomized controlled study.

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Keywords: Attention-deficit/hyperactivity disorder; ADHD; Question prompt list; Communication; Pediatrician; Shared decision-making

Introduction

Attention-deficit/hyperactivity disorder (ADHD) is a pervasive neurodevelopmental condition of childhood, associated with significant health care burden and social costs.^{1,2} The impacts of ADHD on individuals can be far-reaching, with studies highlighting a range of negative outcomes including increased likelihood of unemployment,^{3,4} poor social relationships^{5,6} and involvement in criminal activity and substance abuse.^{7,8}

First-line pharmacotherapy for ADHD involves the use of stimulant medications such as methylphenidate, which have been demonstrated to improve symptoms and in turn, academic and social functioning.^{9,10} Despite this, there is considerable societal concern, stigmatization and misunderstanding surrounding these medications, making it difficult for parents to make decisions about treatment^{11,12} and persist with therapy. Non-adherence to pharmacotherapy for ADHD has been estimated to be between 15 and 87% amongst children and adults receiving treatment for the disorder.¹³

Underlying many of these adherence issues is a lack of appropriate information available to parents.¹⁴ Parents of children with ADHD have

expressed concerns about the inadequacy of available information sources.^{15–17} Although parents trust healthcare professionals (HCPs) for information,^{18,19} they have expressed dissatisfaction with the amount and nature of the information provided to them during consultations.^{20–22} Some difficulties experienced by parents include receiving insufficient information or excessive information not in line with their specific concerns.^{23,24} Parents desire tailored information resources that can be updated over time, thereby maintaining relevance across their child's developmental lifespan.¹⁵ They have also expressed interest in resources to assist with their information gathering and engagement during clinical consultations.¹⁵

Shared decision-making (SDM) is recognized as a gold-standard approach to improving health care quality and achieving such outcomes.²⁵ According to SDM, clinicians explain medical evidence for different options while patients and carers discuss these options within the context of their personal values, experiences and goals.²⁵ The amalgamation of the clinicians' medical knowledge with patients' personal attributes and values allows the two parties to reach consensus about treatment options and ultimately devise a joint treatment plan.²⁶ SDM has been

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