Risk Prediction to support shared decision-making for managing heart disease

Project Snapshot

Heart disease is common in people with chronic kidney disease (CKD), and is a major cause of hospitalization and death. However, people with CKD are less likely to receive tests and treatments for their heart disease than those without CKD. Identifying & meeting the information needs of patients and care providers is important to support patient-oriented approaches to care, especially when complex decisions must be made that require weighing of risks versus benefits.

Project Work Stream

Phase I –Complete

Two qualitative studies to understand the experiences of patients with CKD who have recently made decisions about heart tests and treatments following an acute coronary event (heart attack) and to identify the decision support needs of patients and healthcare providers when making decisions about heart tests and treatments following an acute coronary event (heart attack).

Phase II - In Progress

Development and validation of risk prediction models for important clinical outcomes identified by patients and care providers. Explore attributes of treatment decision making that are important to patients and the value they place on them.

Phase III –Planning Stage

Incorporation of risk information and strategies to identify patient preferences within a decision-aid. This will be followed by testing of the decision-aid with patients and care providers.

Project Updates

The second phase of the study measures patient treatment preferences and values through a discrete choice experiment as well as development and validation of a prediction tool that provides individualized information about the risks of kidney and heart disease outcomes, under different treatment approaches for heart disease. We are more than half way through our recruitment in Alberta and preparing to commence recruitment in BC shortly.

We welcome back our returning and new patient partners to Phase II and look forward to working with them in developing the decision aid tool (in alphabetical order):

- Carol Connolly
- John Wayne Gerber
- Sam Hannon
- Joe Milner
- Winnie Pearson

Next Steps:

Phase III is a co-design phase, in which we will work with patients, their family members, and relevant healthcare providers (clinicians), alongside research experts in clinical decision aids, in an iterative process to develop and refine a decision aid for use within a shared decision-making framework.

We will use a mixed-methods study design using acceptability questionnaires along with focus groups and semi-structured interviews to co-design the decision aid.

The process will begin with content development by the research team, alongside the initial prototype design by the web development company.

To learn more: cansolveckd.ca/research/earlier-diagnosis/risk-prediction-to-support-shared-decision-making-for-managing-heart-disease/

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