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BRIEF REPORT

THE NEED OF INFORMATION IN CLINICAL SETTINGS

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During recent decades, patient-centered approach in health care has come to the forefront of clinical practice, worldwide. This model of care demands active participation by patients and their family in the therapeutic regimen in order to maximize benefits of treatment. Prerequisite for this care, is to provide elaborate and accurate information to patients.^{1,2}

Interestingly, information is a collaborative process in which healthcare professionals and patients work together. Initially, healthcare professionals make attempts to establish, understand and arrange in order of importance the patients' information needs, health beliefs, goals, perceptions, and concerns. Afterwards, they provide patients with well-designed, reliable, and up-to-date information so as to help them comprehend their disease. Patients who receive level-appropriate information, are empowered to participate in decision-making for their own care.^{3,4} Recently, government agencies in several countries have promoted information prescription programs to increase patients' understanding of their health state.⁵

Though provision of information is a dynamic process that must be carefully planned, however, there are observed various obstacles in clinical settings. For example, in emergency care, where quick decisions must be made there is usually a little time for information. On the other side, in medical-surgical departments, there is no available time due to nursing shortage or heavy work. Furthermore, in intensive care units or other settings where patients may lack capacity to receive information for several reasons such as cognitive impairment, mental illness, inability to communicate, the information may be transmitted promptly to those providing care to patients.⁶⁻⁹

The core elements to provide effective information is creating a comfortable environment and devoting sufficient time for Dalageorgou C.

patients to ask questions. Significantly more, the use of clear and no medical terms is a crucial measure to implement accurate information. Acquired knowledge is important to be re-evaluated and reinforced by written/printed information in the form of brochures, leaflets or instructions. An equally important key-element when providing information is to explore patients' characteristics. For example, patients with high level of education achieve deeper understanding of the therapeutic regimen whereas low level of education may be responsible for misunderstandings or poor comprehension of medical instructions. Moreover, single patients or those having no supportive network may be more willing to be informed about handling a complex medical condition or performing self-management tasks.⁶⁻⁹

Additionally, patients' personality and willingness to be engaged in therapy is a matter of importance. Reluctance may stem either from a lack of confidence owing to a long experience of paternalistic decision-making or from patients' cultural and spiritual traditions.⁶⁻⁸ Patient activation is a strong predictor for using health information with individuals of higher education, of higher income, and better self-reported general and mental health status to be more activated.¹⁰

Furthermore, the source of information seem to vary according to age with young patients to seek for information to internet.^{9,10}

Patients' information need is a constant and fluctuating issue which differs according to disease progression or severity.⁶

⁸ For example, patients who had undergone chemotherapy seem to be more informed about several subjects but at the same time need more information on their treatment and follow-up program.¹¹

It is inevitable that information need changes over time (from
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diagnosis until recovery). More in detail, patients need information not only about the disease and its' treatment but also for practical, personal or financial issues, especially after hospital discharge. Specifically more, they desire a planning system that includes information about recovery so as to gain a better understanding of their medicines or therapy.⁶⁻⁸

It is noteworthy that differences are observed between patients and health care teams regarding perception of information need/priority. However, health professionals and patients seem to share a strong interacting bond. For example, health professionals need precise information from patients in order to plan treatment while effective information, enables patients to adhere to treatment plans. Patients should work in partnership with health professionals to develop information interventions.⁶⁻⁸

Unmet information needs are associated with poor clinical outcomes, frequent readmissions, non adherence to medication and generally with absence of adaptive mechanisms to handle with the disease.⁶⁻⁸

Information is obviously one of the most effective ways to adopt and maintain health behaviour changes and is also associated with improved clinical and social outcomes.⁶⁻⁸

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