Using Question Prompt Lists to Help Youth with Asthma Get More Involved in Clinic Visits

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What was the research about?
Asthma is the most common chronic illness among youth in the United States. Asthma attacks can cause youth to miss school and their caregivers to miss work. Managing asthma well can help prevent attacks.

Research on other illnesses shows that having a set of common questions, called a prompt list, before a clinic visit may get patients more involved with their doctors. In this study, the research team wanted to learn if giving youth ages 11–17 a prompt list helped get them more involved in clinic visits and better manage their asthma.

What were the results?
Compared with patients who didn't receive the prompt list, those who did were more likely to

- Ask doctors questions
- Receive information about asthma from doctors
- Say doctors involved them in clinic visits

After 12 months, patients who did and didn't receive the prompt list had similar

- Asthma control
- Quality of life related to their asthma
- Confidence in their ability to manage asthma

The two groups didn't differ in

- How satisfied they were with their clinic visits
- If they took medicine correctly
- How well their lungs worked
- Patient-reported medicine problems, such as side effects or understanding directions
- Emergency room visits
- Unscheduled clinic visits

Who was in the study?
The study included 359 youth with asthma. Patients received care at four primary care clinics in North Carolina. Among the patients, 37 percent were African American, 36 percent were white, 13 percent were Hispanic, and 11 percent were Native American. The average age was 13, and 57 percent were boys. Patients had lived with asthma for an average of 10 years.

What did the research team do?
The research team assigned youth by chance either to receive the prompt list plus a supporting educational video before their clinic visit or to receive nothing. The prompt list included common questions about asthma medicine, triggers, and ways to avoid triggers.
Youth who received the prompt list watched the video on a tablet while waiting for their visit to start. The video focused on the importance of youth being involved during visits and how the prompt list could help. Next, the patients marked questions they wanted to ask on the prompt list. They could give their prompt list to their doctor at the beginning of the visit or use it to remember questions they wanted to ask.

The research team recorded all visits at the start of the study and again 6 and 12 months later. After visits, the team interviewed all youth about their visit and asthma management. Youth who received the prompt list filled it out again before their 6- and 12-month visits. The team repeated the interviews and surveys after those visits.

Youth with asthma, caregivers, and doctors helped design the prompt list and video and gave feedback throughout the study.

What were the limits of the study?
Patients received care from primary care clinics in North Carolina. Also, the study included youth with and without well-controlled asthma. Results may differ in other settings or with only patients whose asthma is poorly controlled. Future research could test asthma prompt lists in these situations.

How can people use the results?
Health clinics could use the results when considering ways to help get youth with asthma more involved in clinic visits.

To learn more about this project, visit www.pcori.org/Sleath269.