



Readability of current Patient Information Leaflets for Informed Consent in UK radiotherapy centers

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- Comprehensive Accreditation Manual for Hospitals: the Official Handbook. Oakbrook Terrace, IL: The Joint Commission, 2011.
- Dodaro A, Recchia V. Inappropriateness in ionizing imaging. The central node of the informed consent: from "event" model to "process" model. Recenti Prog Med 2011; 102(11): 421-31.

References

- Federal Plain Language Guidelines. March 2011. Revision 1, May 2011. PlainLanguage.gov. Available at: http://www.plainlanguage.gov/howto/guidelines/FederalPL Guidelines/FederalPLGuidelines.pdf.
- Recchia V, Dodaro A, Braga L. Event-based versus process-based informed consent to address scientific evidence and uncertainties in ionising medical imaging. Insights Imaging 2013; 4: 647-53.
- Terranova G, Ferro M, Carpeggiani C, et al. Low quality and lack of clarity of current informed consent forms in cardiology: how to improve them. JACC Cardiovasc Imaging 2012; 5(6): 649-55.

5) Conclusion

Current PILs for informed consent in the three radiotherapy centers are difficult for the average patient. Although the readability scores are not very low, higher readability scores should be achieved with innovative PILs which discuss risks/benefits and other elements relevant for informed consent, and which are prepared by following plain language recommendations. This approach can guarantee both the correctness of the clinical act and the validity of the consensus expressed by the patient.

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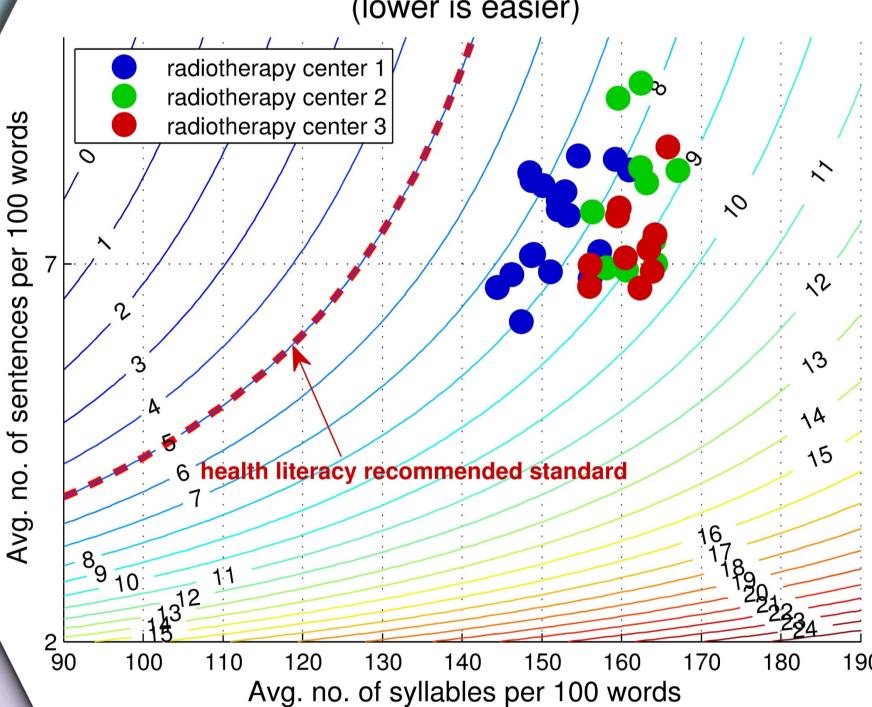
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1) Background

Guidelines on informed consent recommend the use of plain language and readability standards to enhance patient's comprehension, engagement and shared decision making.

Flesch-Kincaid minimum grade-level requirement (lower is easier)



4) Results

Readability is suboptimal for the analysed PILs (red, green and blue points in the figure) and should be improved with respect to the international standard score (red dotted line in the figure). The results show a mean grade level equal to 8.1 (std=0.8), thus suggesting the need of a 3-point decrease on average.

2) Aim

To assess the readability of current Patient Information Leaflets (PILs) used for Informed Consent in UK radiotherapy centers.

3) Methods

We evaluated PILs (n=38) from three radiotherapy centers in the UK. They regard the most common radiotherapy techniques used to treat different kinds of cancer and body districts.

We analysed each text with Flesch-Kincaid (F-K) grade level, meaning that higher numbers correspond to harder-to-read texts (from 0=easy, to 25=difficult). Then, we compared the related grade levels to the health literacy recommended standard of US grade level equal to 5 or below, indicating that patient education texts should be understood by a typical student in the US primary school.





