

MANAGEMENT OF PATIENT AND PHYSICIAN PREFERENCES AND EXPLANATIONS FOR PARTICIPATORY EVALUATION OF TREATMENT WITH AN ETHICAL SEAL

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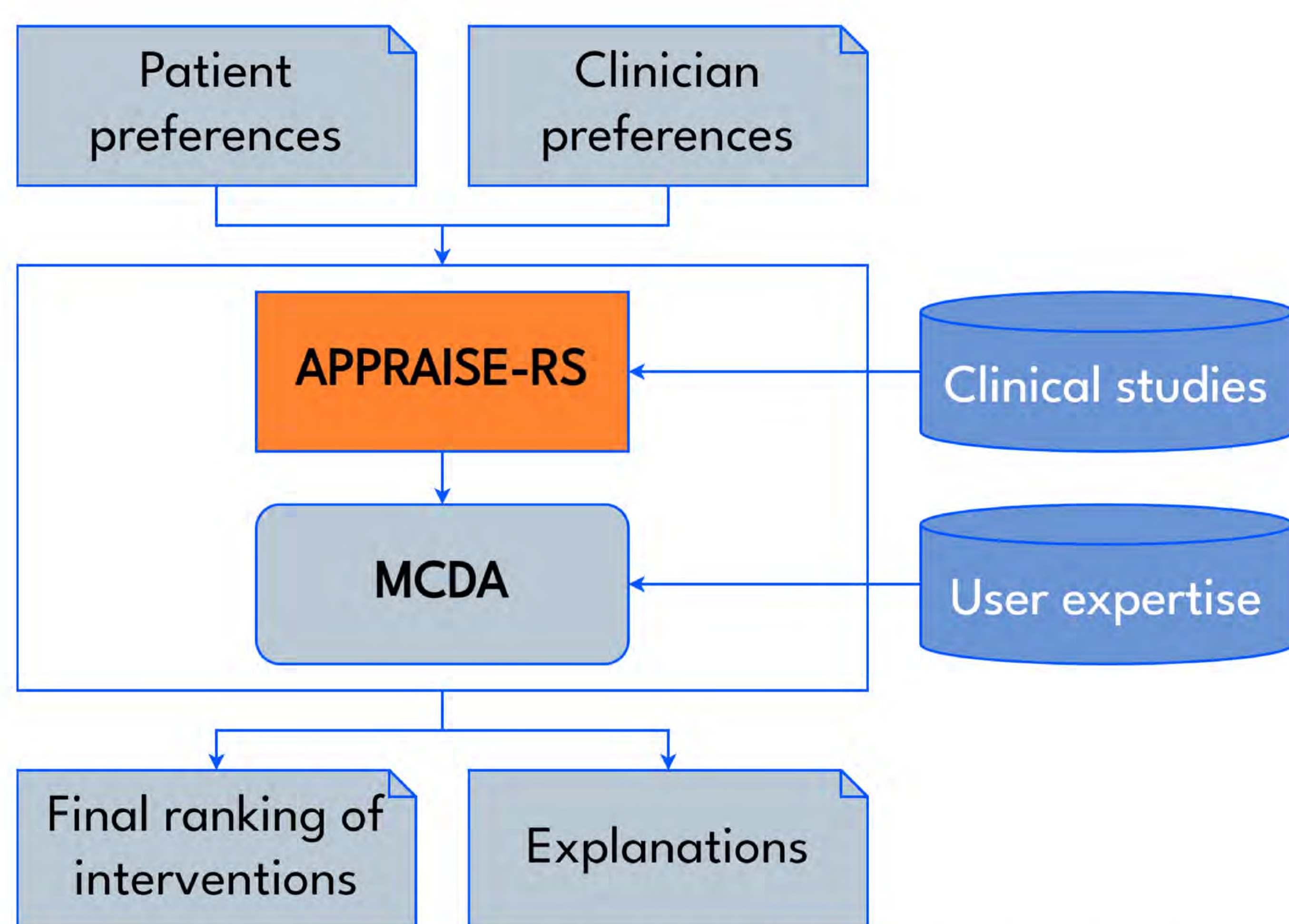
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INTRODUCTION

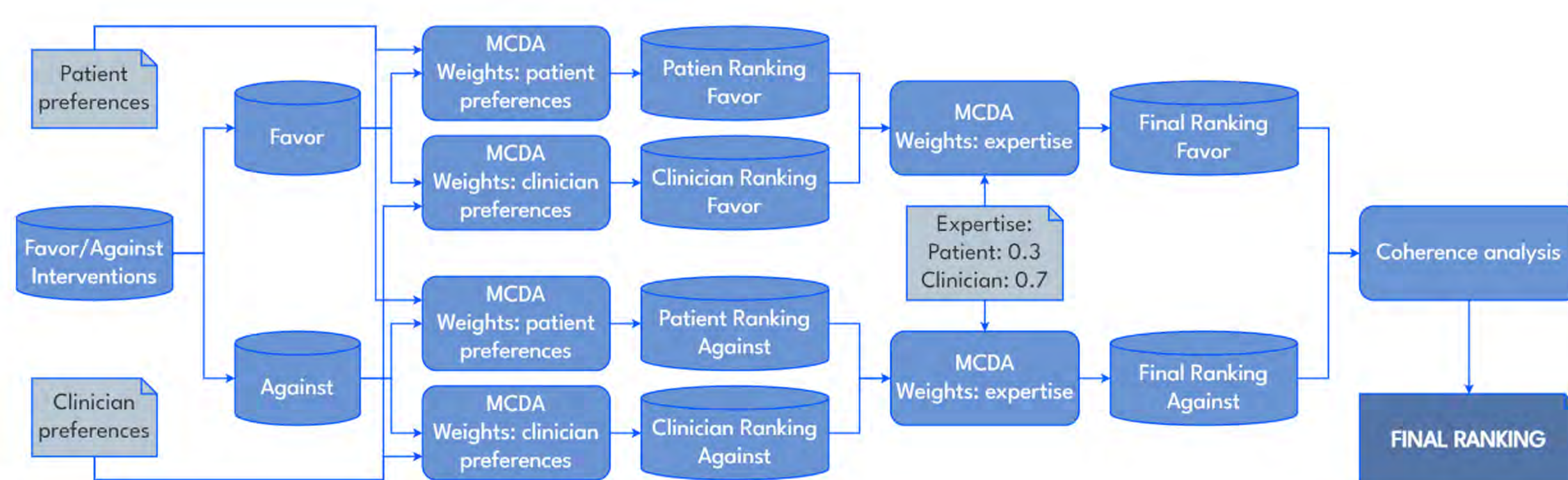
Clinical practice guidelines (CPGs) suffer from poor adherence by clinicians and patients, primarily due to the limited consideration of their preferences. To address this limitation, we aim to enhance CPGs by incorporating clinician and patient preferences into treatment recommendations. Our project addresses the limitations of existing tools and focuses on user expertise, explainability, and ethical considerations.

METHOD

APPRAISE-RS-E method builds upon the existing APPRAISE-RS methodology by incorporating Multi-Criteria Decision Analysis (MCDA) to integrate clinician and patient preferences into the treatment recommendation process.



MCDA framework and APPRAISE-RS interaction.



Steps of the methodology: preference incorporation, separate analysis, and merge rankings to generate a final recommendation.



This methodology is specifically developed and applied to ADHD treatment within the TDApp platform.

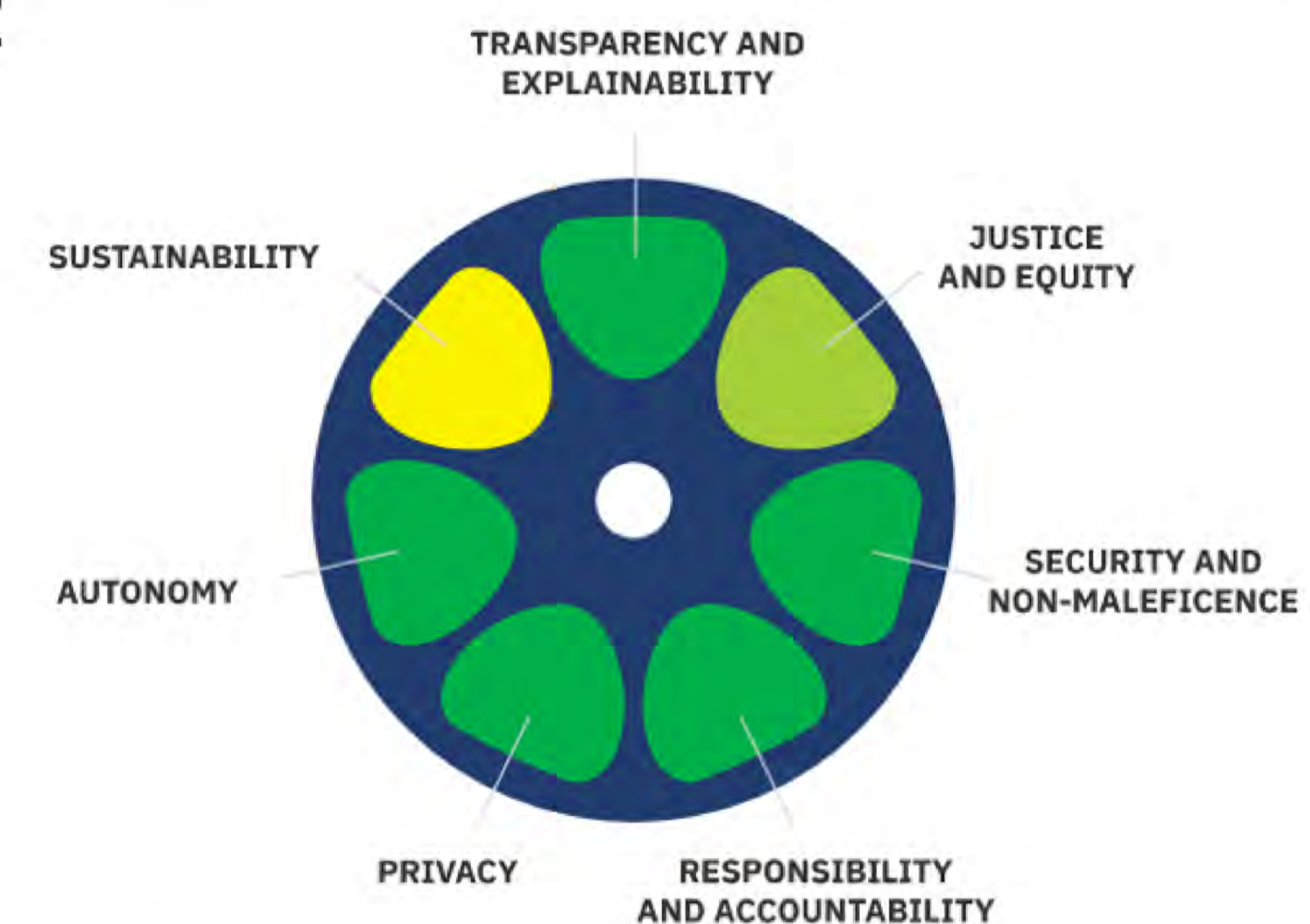


RESULTS

The application of MCDA analysis demonstrates its effectiveness in generating tailored treatment recommendations. Comparisons with CPGs and the previous version, APPRAISE-RS, show that TDApp offers fewer first-line treatment recommendations, indicating a more personalized and patient-centered approach.

PATIENT	AGE	COMPLEX	NUMBER OF INTERVENTIONS RECOMMENDED TO BE ADMINISTERED					
			CPG SPAIN	CPG UK	CPG USA	CPG CANADA	APPRAISE-RS	APPRAISE-RS-E
1	Child/Teen	No	8	2	16	6	4	1
2	Child/Teen	No	8	2	16	6	5	1
3	Child/Teen	No	8	2	16	6	4	1
4	Child/Teen	No	8	2	16	6	1	1
5	Child/Teen	No	8	2	16	6	1	1
6	Child/Teen	Yes	8	2	16	6	1	1
7	Child/Teen	Yes	8	2	16	6	2	1
8	Child/Teen	Yes	8	2	12	2	0	1
9	Child/Teen	Yes	8	2	16	6	1	0
10	Child/Teen	Yes	8	2	16	6	2	1
11	Child/Teen	Yes	6	2	16	6	0	1
12	Child/Teen	No	6	2	16	6	3	1
13	Child/Teen	No	8	2	16	6	1	1
14	Child/Teen	No	8	2	16	6	3	1
15	Child/Teen	No	8	2	16	6	5	1
16	Child/Teen	Yes	6	2	16	4	4	1
17	Child/Teen	Yes	8	2	6	2	1	1
18	Child/Teen	Yes	6	2	16	4	0	1
19	Adult	Yes	6	2	-	5	2	1
20	Adult	No	8	2	-	5	3	1
21	Adult	Yes	6	2	-	5	1	1
22	Adult	No	2	2	-	5	2	1
23	Adult	No	2	4	-	5	2	1
24	Adult	Yes	8	4	-	3	0	1
25	Adult	No	2	4	-	2	2	1
26	Child/Teen	No	8	2	16	6	2	1
27	Child/Teen	No	6	2	16	6	0	1
28	Adult	No	2	4	-	5	1	1
Median	-	-	8	2	16	6	2	1

Results of the PIO model (oeiac.cat) show that the tool has a high ethical performance on 5 of the 7 principles. However, there is room for improvement in Justice and Equity and in Sustainability.



Ethical seal obtained from the pio test.

CONCLUSIONS

TDApp, developed using APPRAISE-RS-E, shows promise in providing personalized intervention recommendations for ADHD. MCDA enables tailored treatments, while comparisons with CPGs highlight its advantages. The PIO test emphasizes TDApp's ethical strengths, with potential for improvement. It enhances treatment recommendations and promotes patient-centered care.

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