Information Therapy (Ix) and Information Prescription: A Systematic Review

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ABSTRACT

To systematically review the observational and control trial evidence on information prescription and information therapy. The Cochrane Library and the medical databases of MEDLINE (1946 to 10 April, 2012), and EMBASE (1974 to 10 April, 2012) were searched with Ovid SP. The authors included only those studies that are related to the prescription of specific health information for specific patient as a complementary medicine. Therefore, they excluded the traditional patient education studies that are based on background information rather than being foreground, evidence-based and decision focused. The authors identified 232 papers and based on the criteria 34 full texts were screened and finally 18 were reviewed in this study systematically. Six papers were randomized control trials (RCTs) and 12 were observation studies. Most of the studies focused on satisfaction and knowledge as their primary outcomes. None of the studies examined the side effects of information intervention. Only one study focused on the health related primary outcomes and showed no significant change in pain and bowel movement (BMs) among children. This review found considerable research gaps in the study of information prescription outcomes. There is need for cohort studies and RCTs with rigorous control of confounding factors to figure out the impact of information prescription and information therapy on patient care.

Keywords: Consumer Health Information (CHI), Health Information, Information Therapy, Information Prescription, Patient Care

BACKGROUND

Information Prescription (IPs) is the provision of specific evidence-based health information to a specific individual/patient to help him/her understand, manage and control the ill health (Gavgani, 2012). IPs can be physician-directed IP or non-physician directed. As an analogy, the physician directed IP is exactly like Rx that is prescribed by a physician to specific patients following a clinical visit and a diagnosis in contrast to a non-physician IP is similar to an over the counter (OTC) medications in which people approach drug stores and buy OTCs.
following a self-diagnosis (Gavgani & Biswas, 2013). In non-physician directed IP, patients search or browse the web for health information and health-related websites with health information in plain language following a need for health related information for themselves or their related ones. The information they may find through surfing the websites is ready to use and “one-size-fits-all” information, according to the NHS description from this kind of readymade information (NHS, 2008a). They can give background knowledge about health-related issues to consumers but not necessarily specific foreground information for supporting the treatment decision, the factor that differentiates information prescription from any kind of consumer health information.

The source of information in both of the prescription types may not necessarily be different. When a physician prescribes information s/he may refer the patient to one or more of the websites that have already been evaluated and confirmed by experts as being standard, i.e. “reliable, evidence-based, decision-focused, up-to-date, non-biased” (Kemper-Mettler, 2002) among other sources of health information. For example, Medline Plus may be visited by a patient, or it may be recommended or prescribed by a physician to a patient. Patients may randomly search the same sources of information, but we cannot expect patients always search the reliable, appraised and expert-confirmed websites for health information without training. Literature shows that, patients are usually unaware of the evaluation criteria, and often find and use information they may find arbitrary on the web (Gavgani & Biswas, 2013) which can be more dangerous than complete lack of information.

Information therapy (I\text{x}) is a broader term for patient empowerment and prescribing information deals with the studies, skills and issues related to “prescription of right information to the right person at the right time” (Kemper-Mettler, 2002a), as a complementary medicine (Gavgani VZ, 2009). In that sense, the information therapy approach is different from bibliotherapy in which a piece of literature, story and scientific book/information is offered to the patient. Bibliotherapy is a term used for the method similar to what we call holistic medicine (Webb, 1933). Webb described bibliotherapy as his own method in patient care. Bibliotherapy deals with patients’ mood and psychological aspect of their attitude towards illness. We can classify bibliotherapy is to anxiety as OTC medication is for pain relief. Another important terms in the field of health information for patients is consumer health information (CHI). CHI has a more general approach like providing information about fitness, nutrition and healthy lifestyle rather than individual focused health information. Its analogy in medication prescription can be aspirin that is used by everyone for pain relief and is an OTC drug. As such, when CHI is prescribed for a person with myocardial infarction (MI), it should follow specific dose and regime which is called IP and not CHI. CHI gives background information thereby empowering an individual to improve his/her health and manage their own health but does not necessarily give decision focused information and capability to make better choices.

Information as therapy has not received its due importance as a well-established approach among health professional because there is lack of strong evidence regarding its effectiveness. Although, there are some published trials focusing on the delivery of health information to the patients and the general population but there are no published systematic reviews. Therefore, there is a need for systematic reviews of the available studies on IP in order to present evidence to strengthen future relevant studies.

**Objectives of Study**

The main objective of the review was to examine the effectiveness of Information Therapy and Information prescription services on healthcare outcomes such as patients’ satisfaction, and perception, physician’s knowledge, usage and also side effects of information prescription.
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