

5C Poster - Theme: Prescribing in the broadest sense

Chair: Dr Grainne Kearney









Dancing for Health and wellbeing: A multimethod feasibility study of examining health impacts of dancing among pulmonary fibrosis patients.





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IRISH RESEARCH COUNCIL
An Chomhairle um Thaighde in Éirinn

Background & Objectives

Pulmonary fibrosis (PF) is a rare, chronic, progressive, fibrosing interstitial pneumonia of unknown aetiology and is an incurable disease. **Physical activity (PA)** is recommended in the management of patients with PF to improve health outcomes.

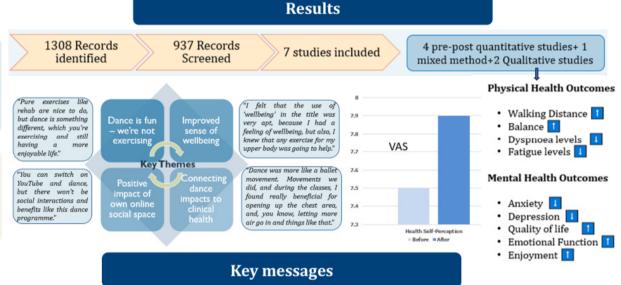


Considering **dance** as an innovative PA, our study objectives were:

1. To identify the efficacy of non-pharmacologic intervention on health impacts in PF patients. 2. To assess the physical and mental health impacts of online dance intervention & 3. To assess the feasibility of dance intervention among **adults living with PF**.

Methods

A **systematic review** - to investigate the health impact of dance interventions in patients with non-infectious pulmonary diseases. Patients with PF, members of the Irish Lung Fibrosis Association, participated in **75 minutes online dance intervention for 8 weeks** delivered by an experienced choreographer. **Pre & post survey** (EQ-5D-3L and the Chronic Respiratory Questionnaire) and **Qualitative thematic analysis** of semi structured interviews - to understand health impacts and feasibility of dancing.



- **Dance** As an alternate exercise-based rehabilitation programme More favourable, higher adherence rate, better health and wellbeing outcomes and achieve higher targets of recommended PA levels in the community.
- **Social prescribing** Creating and promoting alternative exercise forms which patient's can and should enjoy an activity of their choice and have a choice.
- **Enhance civic society** Evidence to promote good collaboration practices among patients, charity organisations, art performers, and academic researchers.



Exploring Users' Interactions with a Conversational Agent to Improve Varenicline Adherence and Smoking Cessation: Insights from a Wizard of Oz Study



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Introduction

- An evidence-based, patient-and provider-informed, artificial intelligence (AI) chatbot, called "ChatV" is being designed to improve patient adherence to varenicline.
- ChatV's features include providing medication reminders and answering questions about varenicline.
- The Wizard of Oz (WoZ) methodology was used to learn the types of questions that patients would ask ChatV. This methodology is an approach where participants interact with what seems like a computerized system, but in which the responses are being generated by a human-being (the "wizard").

Objective

 To explore the key themes of participants' questions across sociodemographic groups, as well as the time required for the chatbot to successfully answer 90% of these questions, in order to inform the development of ChatV.

Methods

- Forty participants interacted with the chatbot from March to September 2023.
- The "wizard" (a research staff member) answered participants' questions using a predefined library of responses which was continuously expanded.
- Transcripts from these interactions were analyzed and participant question patterns were explored across sociodemographic categories.
- Data on time and costs to conduct the study were assessed.

Results

- · Participant question themes included:
- 1. Questions about the medication

Dosing/timing/duration/cost of medication

2. Questions about side effects

Strategies to ameliorate serious side effect

3. Questions about the health condition

Strategies to quit smoking

4. Questions about the chatbot

How is the chatbot doing/feeling

 There was a trend-level decrease in the probability of non-response, which fell below 10% six months after the study began.

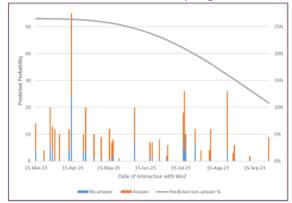


Figure 1. Non-response rate of Wizard of Oz over duration of study

Results

- Question themes did not differ meaningfully by gender or age.
- Patient interviews: participants reported that they liked how informative, detailed, and convenient the chatbot was in providing information regarding the dosage and side effects of varenicline.

Discussion

- Advantages to using a chatbot include improvement of patient autonomy, education, cost efficiency, and reduced physician workloads.
- Patients reported no issues after the WoZ methodology disclosure of deception.
- Disadvantages include staff training and time requirements.

Conclusion

 The results of this analysis will help healthcare professionals in assessing the feasibility of using the WoZ method to develop Al-based healthcare systems with similar goals.

Acknowledgements

We'd like to acknowledge Sowsan Hafuth and Mackenzie Earle for gathering the data.

Funding

CIHR Project Grant: Funding Reference Number: PJT 180405. Proof of Concept Intervention Grants in Primary Prevention of Cancer of the Canadian Cancer Society and the Canadian Institutes of Health Research-Institute for Cancer Research Grant #: 707218; 2024 Koerner Award; INTREPID Lab

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Assessment of the readability of patient-facing materials for the most commonly prescribed medicines in Ireland

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Introduction

- Preventable drug-related morbidity is a major issue.
- 9% of hospital admissions in older adults are preventable.
- 45% of adverse drug reactions can be avoided.
- Clear communication at medication initiation is key.

Health literacy challenges in Ireland:

- 4 in 10 adults have limited health literacy.
- 1 in 4 struggles with numeracy.
- Health literacy includes understanding and applying medical information.
- Outcomes of Limited Health Literacy (Figure 1)

Patients rely on healthcare providers, pharmacists, PILs, and online resources for medical information.

Study Aim:

 Assessed readability of PILs, decision aids, and online medicine information for commonly prescribed medicines in Ireland.

Results

- 265 different patient-facing materials from 88 distinct medicines were included in this descriptive analysis.
- On average readability of included sources exceeded the 8th-grade target (Avg. 10.24).
- Only 4 out of 265 resources met the target, mostly patient decision aids.

References:



I don't fully understand my condition and treatment. I am more at risk of going to hospital. I am less likely to go for screening.

Figure 1: The impacts of limited health literacy and numeracy

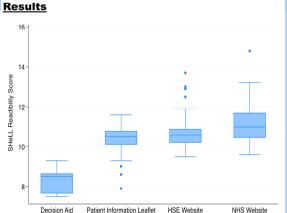
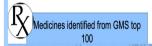


Figure 3 : Boxplot illustrating distribution of SHELL editor scores for different materials

Methodology

Multidisciplinary stakeholder group PPI, academic, policy maker input

Cross-sectional, descriptive analysis (August 2024)



Readability assessed using the

urces. NTS A7. lists

Number of Polysyllable Words

Figure 2: Methods

Discussion

Patient-facing written materials for commonly prescribed medicines in Ireland exceed target readability scores.
Future research should focus on developing and evaluating more accessible materials. Participatory co-design approaches involving the public, patients, communication experts, and clinicians will be essential. Large language models like ChatGPT could efficiently enhance medicine information readability and simplify content for patients undergoing complex surgeries

Similar results have been found for written materials for supporting patient decisions in cardiology and stroke medicine. A key strength of this work was the inclusion of key stakeholders, including PPI, at all stages of the research cycle. However, a major limitation is that readability formulas like the SMOG index have inherent weaknesses, as they assess only surface-level features and do not account for other factors that influence comprehension.



Progesterone Dosage Accordance in Hormonal Replacement Therapy



Authors: Juliana Portela Passos, Dr. Elizabeth Murphy, Dr. Sonya Ryan Affiliations: University of Limerick School of Medicine & Blossom Gate Medical Centre (Kilmallock)

Introduction:

- *Hormonal Replacement Therapy (HRT) is important for managing menopausal symptoms such as hot flashes, night sweats, vaginal dryness, as well reducing osteoporosis risk and improving quality of life when used appropriately and in accordance with individual patient needs.
- Estrogen is essential for managing menopausal symptoms, with higher dosages often prescribed for more severe symptoms. Progesterone coverage is required to prevent endometrial hyperplasia and endometrial cancer. This protective measure is crucial for women who have not had a hysterectomy.
- Progesterone dosage should be proportionate to the dosage of estrogen. Estrogen doses higher than 50mcg, or equivalent, require additional progesterone to ensure adequate endometrial protection.
- Prior to initiating HRT, patients should be informed about its benefits and risks, including potential side effects and the importance of adhering to the prescribed regimen.
- Guideline adherence and regular monitoring are essential for effective management and patient safety.
- This audit aims to evaluate a GP clinic's adherence to the British Menopause Society (BMS)¹ HRT guidelines, identify discrepancies in HRT prescriptions, with a particular focus on patients with high dose estrogen (HDE), and to implement measures to improve guideline adherence.

Methods:

- The BMS guideline was used for the standard and the SOCRATES computer system was used for data collection. A systematic retrospective review of the medical records of female patients with intact uteri on HRT at GP practice was performed. Patients identified with incorrect progesterone dose were contacted and had their dosage adjusted according to the BMS.
- Prior re-auditing, quality improvement was performed, including staff training, patient education, and electronic updates to ensure ongoing reviews, adherence to the guidelines and to address the discrepancies.

Results:

- ❖Initially, 154 patients on HRT were identified
 - \$51 were on HDE, from which 19 were not on the recommended progesterone dosage.
- Post changes implementations, the re-audit showed that 18 of 19 patients had their progesterone dosages corrected and 1 had her estrogen dosage reduced.
 - ❖ 13 new HRT patients were identified, with 6 being on HDE.
- Final re-audit showed 167 patients on HRT
 - ❖56 on HDE, all with appropriate progesterone.

Table 1: First Data Collection & Comparison with the Standard

Total Number of Women on HRT	154
Patients on Higher Dose Estrogen	51
Women on High Dose Estrogen Without	19
Appropriate Progesterone Coverage	-
Women on High Dose Estrogen With Appropriate	32 (62.7%)
Progesterone Coverage	
Standard	98-100%

Table 2: Re-audit Data Collection & Comparison with the Standard

1300 to 1400 pg (1800 pg 1500 pg	
Total Number of Women on HRT	167
Patients on High Dose Estrogen	56
Women on High Dose Estrogen Without	0
Appropriate Progesterone Coverage	
Women on High Dose Estrogen With Appropriate	56 (100%)
Progesterone Coverage	
Standard	98-100%

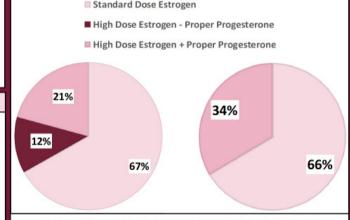


Figure 1: HRT Patients & Respective Doses Pre and Post Changes

Discussion:

- *HRT is an effective approach to minimizing vasomotor symptoms as well as osteoporosis prevention in postmenopausal women². A critical aspect of HRT is balancing estrogen and progesterone in order to reduce the risk of endometrial hyperplasia and malignancy in women with an uterus ³.
- This audit provided critical insights into HRT BMS guidelines adherence, particularly concerning the progesterone coverage for women on HDE.
- The initial audit identified discrepancies in progesterone coverage among women on HDE, accentuating the importance of vigilant monitoring and adherence to guidelines to provide effective symptom management and reducing potential risks⁴.
- The findings are highly relevant as they emphasize the critical need for adherence to guidelines to prevent adverse health outcomes.
- The discrepancies found in the initial audit highlight a critical area for improvement in patient safety and quality of care. Interventions put into place successfully addressed the discrepancies.
- Literature consistently emphasizes the risks associated with inadequate progesterone coverage in women receiving estrogen therapy. The improvements seen post-intervention demonstrated the effectiveness of targeted measures, such as staff training and electronic updates, in significantly improving compliance and protecting patient health.
- *Comprehensive training sessions and updated protocols can enhance healthcare provider knowledge and ensure consistent application of best practices in HRT prescribing. The introduction of electronic updates with alerts and reminders can help maintain high compliance levels and facilitate timely interventions when discrepancies are identified.
- Repeat audits should be scheduled at least annually to ensure sustained guideline compliance. Re-audits should include a review of new HRT patients and a reassessment of existing HRT patients, in order to monitor ongoing adherence and address any emerging issues.

Conclusion:

- The audit successfully identified and addressed gaps in HRT management, leading to improved patient safety and adherence to the BMS guidelines.
- The audit highlights the importance of regular monitoring to maintain compliance with established medical guidelines.
- Regular clinical audits and continuous education are valuable tools for maintaining high standards of care in HRT management, improving patient safety, as well as systematically identifying and addressing areas of nonconformities.

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Affordable Food Clubs: Dignified Help for Food Insecurity and What General Practice Should Know

Dr Meghan Deery, Dr Hannah O'Hara, Dr Claire, McEvoy, Dr Grainne Kearney

Food Insecurity

- Estimated to affect 13.6% of UK households (1).
- Households on lower incomes are consistently associated with poorer diet quality, resulting in adverse health outcomes

Food Banks

- Initially set up for emergency food provision, now relied on regularly by many
- The Trussell Trust reported a 94% increase in distribution of emergency foot parcels over the 5 years up to March 2024

What about Northern Ireland?

- Funded directly from the Department for Communities
- Most organisations are independent community developed initiatives



'Hunger in the UK isn't really about food. It's about people not having enough money for the essentials. -The Trussell Trust (2)



Aim of Study

- To understand the landscape of Affordable Food Clubs within Northern Ireland including where they are based, their local links and wraparound services
- To explore the understanding of GP Trainees of Affordable Food Clubs

Methods

Phase 1:

Distribution of a questionnaire to consenting Affordable Food Clubs with pre-established links to the Centre for Public Health at QUB to gather data on local Affordable Food Clubs

Phase 2:

Delivery of an educational workshop to participating GP trainees within Northern Ireland regarding Affordable Food Clubs and exploring their understanding of these following the workshop

What Next?

- Submit research protocol for ethical review
- Present at upcoming conferences including workshop presentation at Royal College of General Practitioners Annual Conference, October 2025

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Medicines support and social prescribing to aDdress pAtient prioritieS in multimorbidity (MIDAS): A process evaluation protocol

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Introduction: MIDAS Trial

 Aim: to evaluate the clinical and costeffectiveness of two interventions aimed at improving multimorbidity outcomes in primary care: MyComrade (pharmacists) and LinkMM (link workers).

Aim of the Process Evaluation

 To explore the implementation of both interventions and the experiences of practitioners, intervention personnel and patients involved in both interventions and the control group.



Methods

- Convergent parallel mixed-methods design.
- 54 participants.
- Three-person Public and Patient Involvement (PPI) panel.

Quantitative data collection

- Patient questionnaires and trial outcome data.
- Intervention personnel activity logs.

Qualitative data collection

- · Semi-structured interviews.
- Mobile Instant Messaging Ethnography (MIME) via the Threema app.



Discussion

- This process evaluation will:
 - Provide a detailed understanding of implementation, contextual factors, and mechanisms influencing the effectiveness of both interventions, and
 - Contribute to the evidence on implementing complex interventions to improve care for people living with multimorbidity in primary care settings.

















General Practitioners' and women's experiences of perimenopause consultations: a qualitative evidence synthesis protocol



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Introduction

This study is part of a larger research study to improve shared decision-making between GPs and women during perimenopause consultations

- Increase in the number of women seeking care from GP
- Some women feel dissatisfied

Methods/Progress to Date

- ✓ Meta-ethnography Noblit and Hare (1988) as described by Sattar (2021)
- Following eMERGe reporting guidelines
- GRADE-CERQual assessment will be conducted

Sample

• GPs and/or perimenopausal women

Phenomenon of interest

Experiences of perimenonause

Records identified from databases (n = 1824)



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Conclusion

Findings will:

- offer new insight into how GPs and women experience consultations for perimenopause in general practice
- contribute to the future development of interventions to improve shared decision-making

Future Work/Next Stens

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nd women's d perceptions of consultations? ons regarding e during e consultations ective of both?

consultations in general practice

Design

 Qualitative or mixed methods studies

Evaluation

 Qualitative analysis of lived experience of perimenopause consultations

Research type

Peer reviewed literature

Reports assessed for eligibility (n = 91)

1235)



Studies included in review (n = 9)

An exploratory qualitative study to understand GP's perspectives of shared decisionmaking in perimenopause consultations

Interested in participating? Please scan the QR code



Laura-Jane McCarthy, School of Public Health, University College Cork, Ireland

Laura-JaneMcCarthy@ucc.ie

GP can firreliper consultations of

Review Qu

- What are GPs' a experiences an perimenopause
- How are decision treatment mad perimenopause from the perspe

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D. 1988, Meta-Ethnography, 1st ed, SAGE Publications Inc, Los Angeles . Sattar R, Lawton R, Panagioti M, Johnson J. earch: a guide to using a meta-ethnographic approach for literature synthesis. BMC Health Services Research [Internet]. 2021 Jan 8;21(1).