

Evaluating the Quality of Online Information on Epidural Anaesthesia in Labour

Peter Currie, Susan Baird, Mark Riddell, Timothy Patterson

Background and objectives:

The use of epidural anaesthesia in labour (EAIL) is becoming increasingly common however the consent process surrounding this is fraught with many women being consented mid-labour whilst under a great deal of physical and emotional stress. Surveys have found impaired risk recall suggesting the current consent process requires improvement. Patient education is the primary means for this as only the most high risk women meet an anaesthetist ante-natally where this can be discussed. We decided to conduct a study looking at the quality of online information on EAIL as the internet is increasingly used for healthcare information.

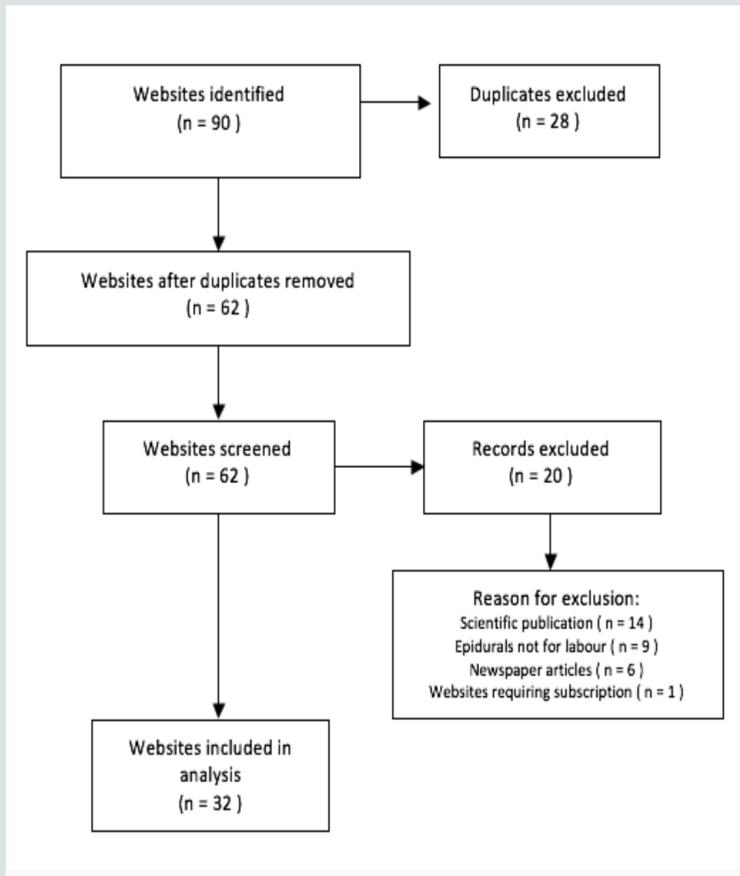


Figure 1. Website Selection Flow Chart

Methods:

The most popular online search engine google was used with 3 search terms related to EAIL, “Epidural”, “Epidural for labour” and “Epidural during labour”. We included the first 30 results for each term. After applying our exclusion criteria we were left with 32 websites (Figure 1).

The websites were assessed by 3 independent reviewers using the DISCERN instrument which is a validated tool for assessing the quality of text based healthcare information. A sub group analysis was performed comparing public health provider websites to all other websites.

Inter-reviewer reliability was assessed by calculating Kendall's coefficient.



Results:

DISCERN scores ranged from 31 to 75 out of a possible 80 with an mean of 53.2. The mean DISCERN scores for each question are displayed in table 1 by subgroup.

The subgroup analysis found that in 9 of the 32 websites which were produced by public health providers the average DISCERN score was 50.9 compared to 54.2 in the “Other” category. This was found to be non-significant by two tailed T testing with a p value of 0.329.

Kendall's coefficient of correlation was calculated to be 0.7928 suggesting fair concordance between reviewers.

Question	Public Healthcare Provider	Other
1. Clear Aim	3.0	3.1
2. Achieved Aim	3.9	4
3. Relevance	4.2	4.1
4. Referencing	1.8	3
5. Dating of sources	2.8	3
6. Unbiased	3.1	3.5
7. Additional support	2.7	2.4
8. Refers to uncertainty	3.4	3.6
9. Description of treatment	3.6	3.8
10. Benefits of treatment	3.4	4
11. Risks of treatment	4.2	4.2
12. What happens with no treatment	2.1	2.4
13. Effect of quality of life	3	3.1
14. Alternative treatments mentioned	3	3.6
15. Supports shared decision making	3.5	3
16. Overall score	3.1	3.3

Table 1. Mean DISCERN score out of a possible 5 for each question

Discussion:

The quality of online information on EAIL is highly varied. Our analysis found that most websites scored well on questions surrounding the benefits and risks with some specifically mentioning risks such as a dural puncture headache. However many scored poorly on questions regarding sources of information, alternative treatments and what would happen if no treatment was given.

Discussion (continued):

Patient education on EAIL prior to labour has been shown to be the primary means for improving capacity to consent due to the difficulties surrounding consent whilst labouring. The reading preferences of the population and especially pregnant women have changed with surveys finding that they used the internet at least once per month to search for pregnancy related information. It is therefore important that health care practitioners are aware of this and produce and direct patients to quality sources of online information on epidural analgesia in labour.

The subgroup analysis showed there was no significant difference between public healthcare provider websites and other websites. This highlights the need for public health providers such as the NHS to invest in online resources for patients to improve their understanding of treatments such as EAIL.



Conclusion:

Online information on epidural anaesthesia in labour is of variable quality when assessed using the DISCERN instrument. Websites scored well on questions regarding risks and benefits but often scored poorly on others due to a lack of referencing and failure to mention alternative treatments. More should be done to develop high quality online healthcare resources on epidural anaesthesia for women to reflect modern reading practices and improve their understanding of the topic thus empowering them to make informed decisions.