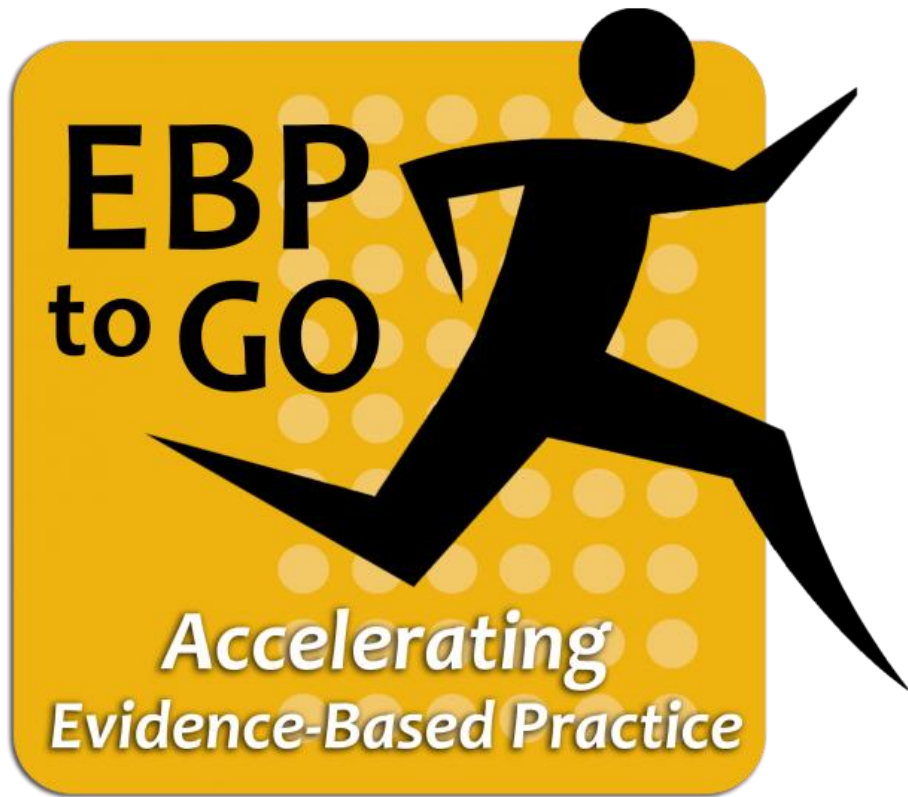


Evidence-based Practice and Policymaking Committee

, Taichung Veterans General Hospital, Taiwan

Shared Decision Making (SDM): Current Status and Application



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醫證醫學三要素 (3E)

提出問題

知識鴻溝

搜尋及評讀文獻證據等級

執行不一致

應用及評估

實證醫學核心與鴻溝

環境
(Environment)

溝通 = 知情同意

醫師對病患詳細說明病情，並就因應之檢查或治療提供充分之資訊，病患在充分理解後做出承諾，在沒有受任何強制之自由立場下，選擇檢查或治療之方法，而醫師則根據此同意進行醫療¹

醫療人員
(Clinicians)

醫療知識
專家

醫病共享決策
(SDM)

患者
(Patients)

身體狀況
專家

¹陳子平，2010年，〈醫療上「充分說明與同意」之法理在刑法上的效應〉（上）、（下），《月旦法學雜誌》第178期，頁227-245、第179期，頁248-271。

1. At least two participants-**physician** and **patient** be involved
2. Both parties **share information**
3. Both parties **take steps** to build a **consensus** about the preferred treatment
4. **An agreement** is reached on the treatment to implement ¹ Charles Cathy

醫病共享決策操作型定義

1. 尚無**明確實證結果**之處置和用藥
2. 嚴重且**致命**的疾病
3. 可能有**重大身心功能、形象改變或併發症**之處置和疾病
4. 需要**長期服用的藥物**
5. 醫療**不確定性比重越大**的情況，例如複雜疾病或**多重處置和用藥選擇**

醫病共享決策時機

1. 邀請病人參與 (Invite patient to participate)
2. 向病人說明疾病、治療(檢查)方案選擇 (Present options)
3. 向病人提供所有治療方案的比較資訊 (Provide information on benefits and risks)
4. 了解病人對治療方案的偏好 (Assist patient in evaluating options based on their goals and concerns)
5. 向病人分析治療方案的優劣 (Facilitate deliberation and decision making)
6. 支持病人依其價值觀進行醫病共享決策 (Assist with implementation)

醫病共享決策操作型步驟

選擇對話
Choice talk

回顧病情
提供資訊
個人醫療
觀察反應

SDM引導員

選項對話
Option talk

確認知識
列出選項
分析好壞
決策工具

SDM工具
SDM指引
確認需求

決策對話
Decision talk

再次分析
共同決策

SDM達成
開始治療

建議引導三部曲

Renal Failure: What type of therapy should I have?

1

Get the
information

2

Compare
options

3

Your
feelings

4

Your
Decision

5

Quiz
yourself

6

Your
summary

Get the information

1. Your options:

Option 1: **Hemodialysis**

Option 2: **Peritoneal dialysis**

2. Key points to remember

Dialysis can help you feel better and live longer, but it is not a cure for kidney failure. After you start dialysis, you will need to keep doing it to stay as healthy as possible.

3. FAQs

4. Credits and references

Renal Failure: What type of therapy should I have?

1

Get the
information

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Compare
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3

Your
feelings

4

Your
Decision

5

Quiz
yourself

6

Your
summary

Compare options

Comparison

Hemodialysis

Peritoneal Dialysis

What is usually
involved

Benefits

Risks and side effects

Renal Failure: What type of therapy should I have?

1
Get the
information

2
Compare
options

3
Your
feelings

4
Your
Decision

5
Quiz
yourself

6
Your
summary

Your feelings

My other important reasons:

My other important reasons:



More important

Equally important

More important

Reasons to choose hemodialysis at a dialysis center

Reasons to choose peritoneal dialysis

I feel more comfortable having professionals handle the procedure.

I am confident that I can do the procedure myself.

More important

Equally important

More important

I don't want to have dialysis every day.

I don't mind having dialysis every day.

More important

Equally important

More important

I live near a dialysis center or am able to get to a dialysis center.

I live far from a dialysis center or have trouble getting around.

More important

Equally important

More important

I prefer to be around others who are also getting dialysis.

I like the independence of doing the dialysis myself.

More important

Equally important

More important

I don't mind people sticking needles in me.

I hate having needles stuck in me.

More important

Equally important

More important

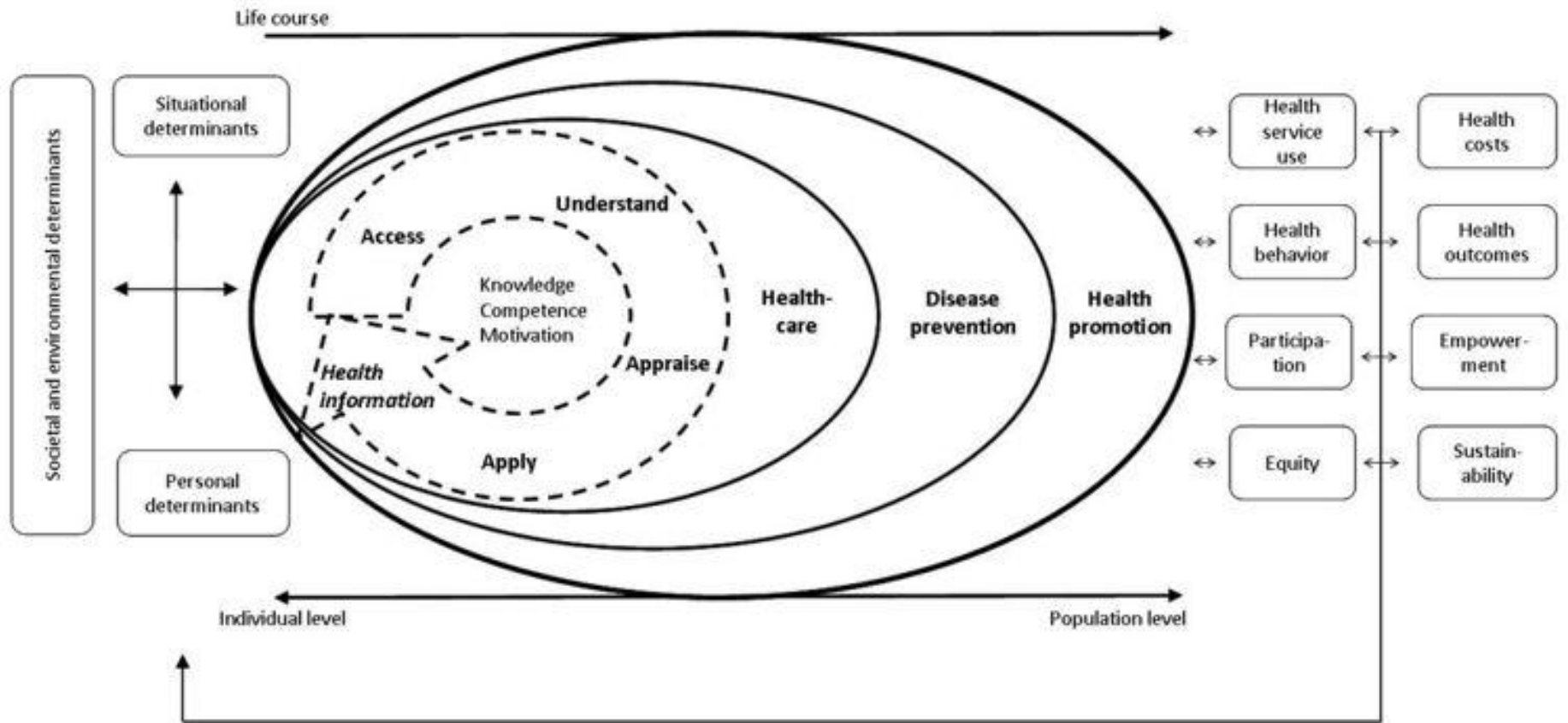
1. 實證醫學評讀提供證據和比較依據
ROB 2.0 / ROBINS-I / GRADE /
Guidelines

2. 確認病人認知，釐清問題和分析好壞
Share decision aids (衛教單張 / 冊子 /
網路資源 / 多媒體影音)

跨領域團隊合作

強調圖像化 / 語言簡單化 / 自行使用

醫病共享決策



健康識能

Does patient have ASCVD? [INFO](#)

No

Yes

Unknown

Data Review:

*Sex [INFO](#) Female **Male***Total Cholesterol(mg/dL) [INFO](#) 200*Systolic (mmHg) [INFO](#) 140*Age (40-79 years) [INFO](#) 40*Triglycerides (mg/dL) [INFO](#) 150BP Medications? [INFO](#) **No** Yes UNKRace / Ethnicity [INFO](#) Unknown ▾*HDL Cholesterol (mg/dL) [INFO](#) 38Diabetes [INFO](#) **No** Yes UNK*LDL Cholesterol (mg/dL) [INFO](#) 132Smoking [INFO](#) **No** Yes UNK

Footnotes

"Unknown" is selected for Race/Ethnicity. The tool uses "White" race for risk calculation and may be less accurate for non-White patients. [INFO](#)

"Unknown" is selected for presence of atherosclerotic cardiovascular disease (ASCVD). The tool assumes "no" but this should be confirmed.

Your Choices

Take a Statin? [INFO](#) No Yes **Undecided**

Choose Medication ▾

Impact of Decision:

Not taking a statin will leave baseline cardiac event risk at 1.9%

Illustration of Risks: of 100 men age 40 over 10 years making no changes:



Events = heart attack, stroke or death



2 have events.

[INFO](#)

Side effects = muscle aches.



93 have no events or side effects.

[INFO](#)



5 have muscle aches at baseline (placebo).

[INFO](#)

Population

100

1000



Peritoneal Dialysis & Swimming/Baths

rate this: ☆☆☆☆

- With a presternal catheter, tub baths can be safe
- Your clinic MAY let you swim in the ocean or a private, chlorinated pool
- A special bandage or ostomy bag can keep a PD catheter dry so you can swim

But...

- Tub baths and hot tubs are NOT safe with an PD catheter in your belly
- A special bandage or ostomy bag may cost about \$4 each



Standard Hemodialysis & Swimming/Baths

rate this: ☆☆☆☆

- You CAN swim or take tub baths on HD

But...

- Take care not to remove needle scabs
- Cover an HD catheter when you shower



Daily Hemodialysis & Swimming/Baths

rate this: ★★☆☆

- You CAN swim or take tub baths on HD

But...

- Take care not to remove needle scabs
- Cover an HD catheter when you shower



Nocturnal Hemodialysis & Swimming/Baths

rate this: ★★☆☆

- You CAN swim or take tub baths on HD

But...

- Take care not to remove needle scabs
- Cover an HD catheter when you shower



Cochrane
Library

Cochrane Database of Systematic Reviews

Interventions for increasing the use of shared decision making by healthcare professionals (Review)

Légaré F, Adekpedjou R, Stacey D, Turcotte S, Kryworuchko J, Graham ID, Lyddiatt A, Politi MC, Thomson R, Elwyn G, Donner-Banzhoff N

醫病共享決策的實證醫學

Figure 1. Flow diagram of Cochrane update on interventions for increasing the use of shared decision making by healthcare professionals (up to 15 June 2017)

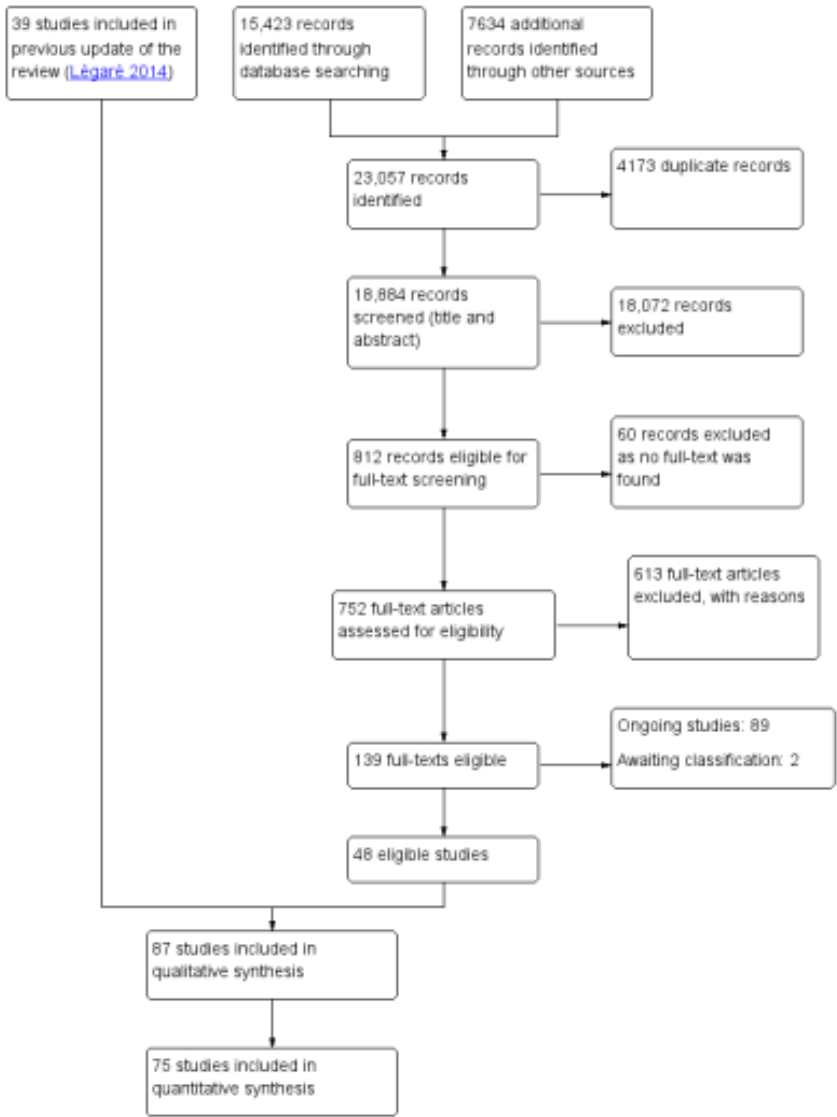


Figure 2. 'Risk of bias' graph: review authors' judgements about each risk of bias item presented as percentages across all included studies.

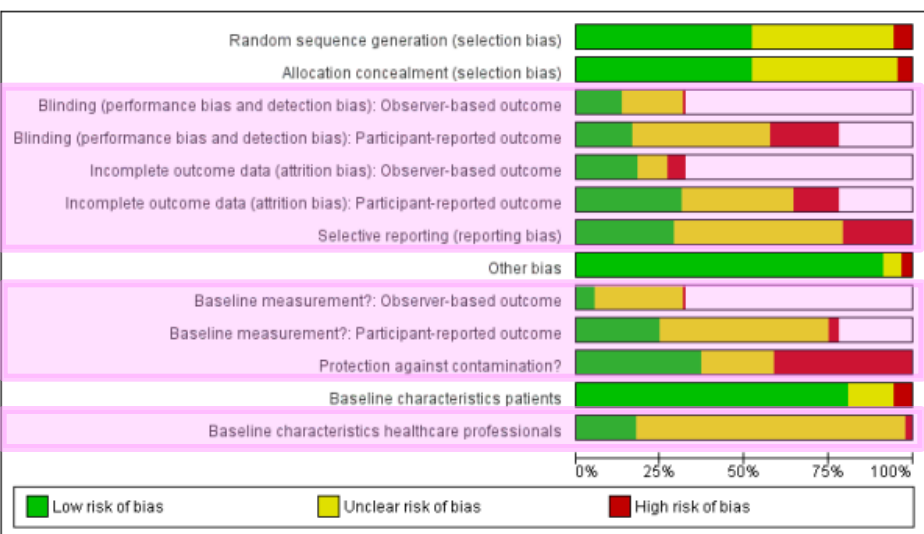
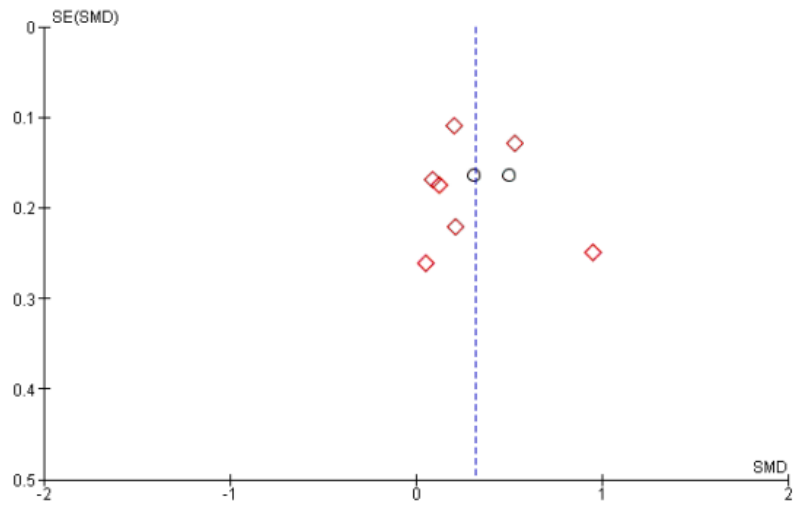


Figure 4. Funnel plot of comparison: 1 Group 1: Interventions targeting patients compared to usual care, outcome: 1.2 Shared decision making (PROM, continuous).



醫病共享決策的實證醫學

Outcomes	Illustrative Comparative Risks (95% CI)		No. of Participants (studies)	Certainty of the Evidence (GRADE)
	Assumed Risk [Control]	Corresponding Risk [Experimental]		
Intervention targeting patients compared to usual care				
SDM OBOM (F/U 6mths)		SMD 0.54 (-0.13-1.22)	424 (4 RT)	Very Low
SDM PROM (F/U 3yrs)		SMD 0.32 (0.16-0.48)	1386 (9 RT)	Very Low
Decision Regret (F/U 6mths)		SMD -0.10 (-0.39-0.19)	212 (1 RT)	Very Low
Health-related QOF (physical) (F/U 3mths)		SMD 0.00 (-0.36-0.36)	116 (1 RT)	Very Low
Health-related QOF (mental) (F/U 3mths)		SMD 0.10 (-0.26-0.46)	116 (1 RT)	Very Low

1. 結論 It is **uncertain** whether any interventions for increasing the use of SDM by healthcare professionals are effective **because the certainty of the evidence is low or very low.**
2. 87 studies (**45,641** patients and **3113** healthcare professionals) mainly in the **USA, Germany, Canada** and the **Netherlands.**
3. Heterogeneity between studies, possible sources of error, reporting bias, insignificant outcomes

醫病共享決策

To be, or not to be, that is
the question.

William Shakespeare





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衛生福利部
醫病共享決策平台

Ministry of Health and Welfare,
Platform for Shared Decision Making

請輸入關鍵字

搜尋

熱門關鍵字: [人工膝關節](#) [SDM 輔助工具](#) [呼吸](#) [醫病](#)

醫病共享決策平台

1. 醫病共享決策是**醫生**和**病人**之間，針對病人的病情**分享資訊**和**溝通**，**充分理解**後逐步達成**治療共識**。
2. 醫病共享決策使用時機在尚**無明確實證結果**之處置和用藥、**嚴重且致命**的疾病、**可能有重大身心功能、形象改變或併發症**的處置和疾病、**需要長期服用的藥物**、**醫療不確定性**比重越大
3. 醫病共享決策**實行困難**在於**實證醫學證據評讀**和**反覆確認病人理解程度和偏好**(或擔憂)。
4. 醫病共享決策的推行即使證據不足，但大趨勢所趨，**勢在必行**。

Take Home Messages

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