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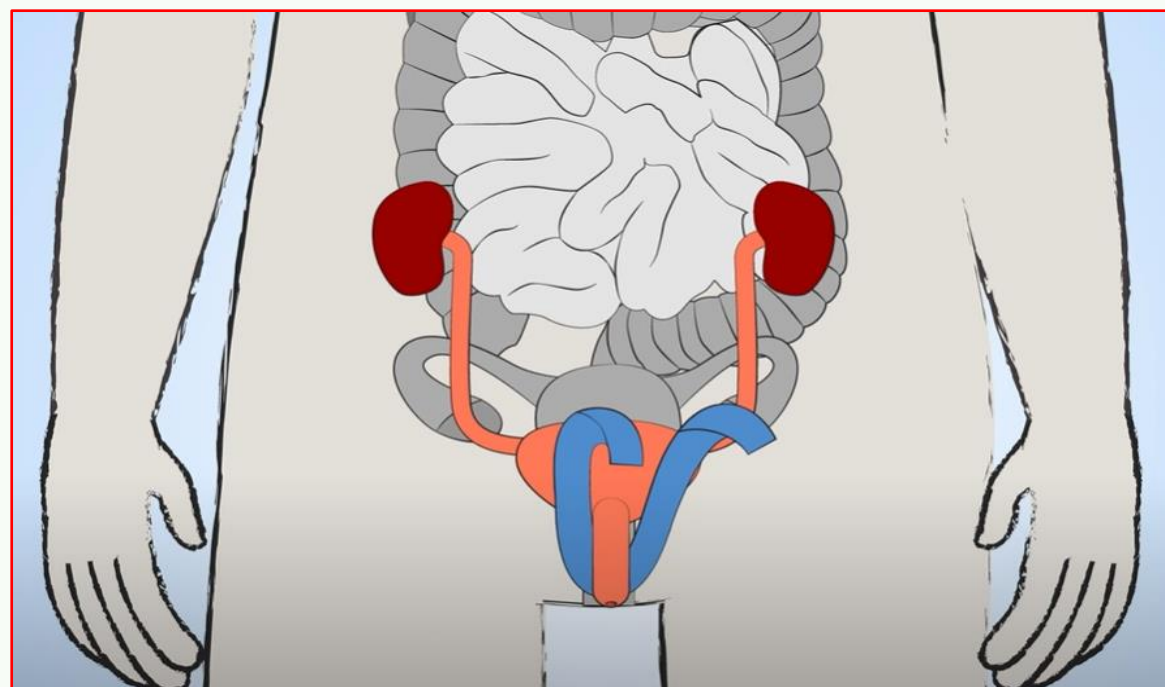
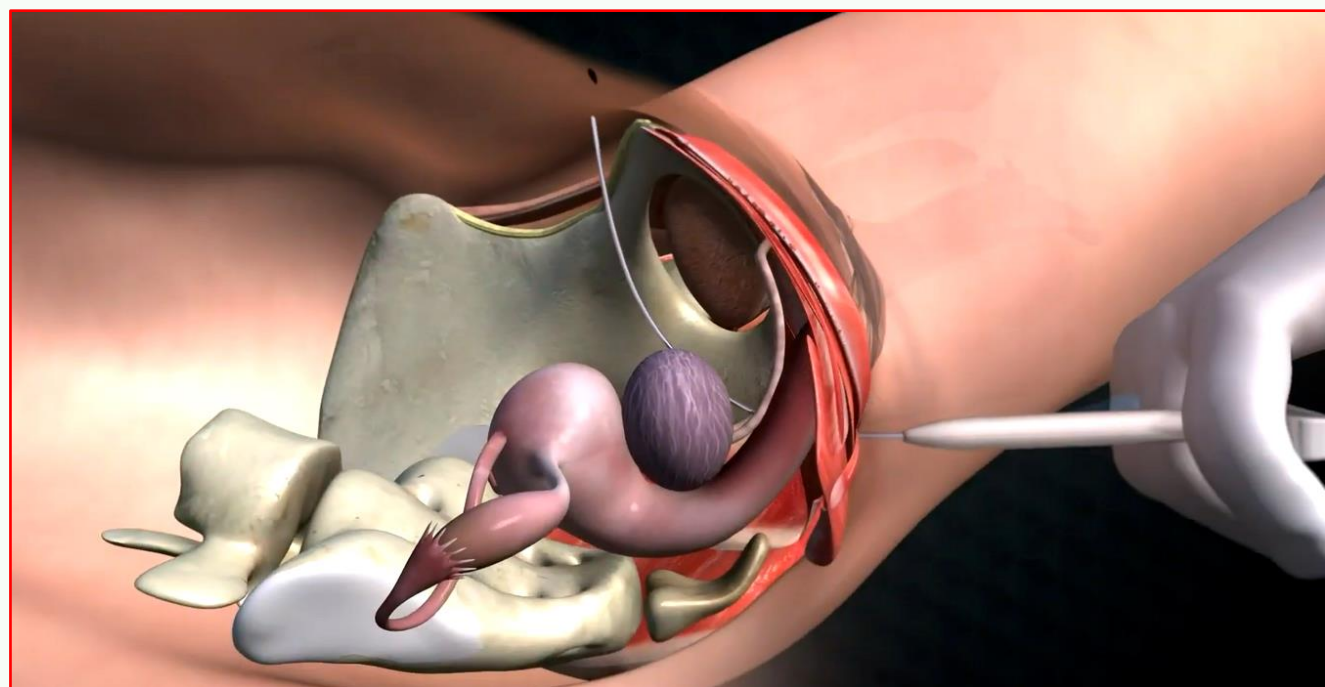
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Objective

- Stress urinary incontinence (SUI) is common in women. This study uses patient feedback to evaluate a 3.5-minute video on SUI surgery options.

Design

- This service evaluation assessed a video comparing four SUI procedures. Created at NHS Ayrshire & Arran, the video was based on the validated SUI-patient decision aid¹. It was developed using the co-creation principle and published on YouTube in 2021.

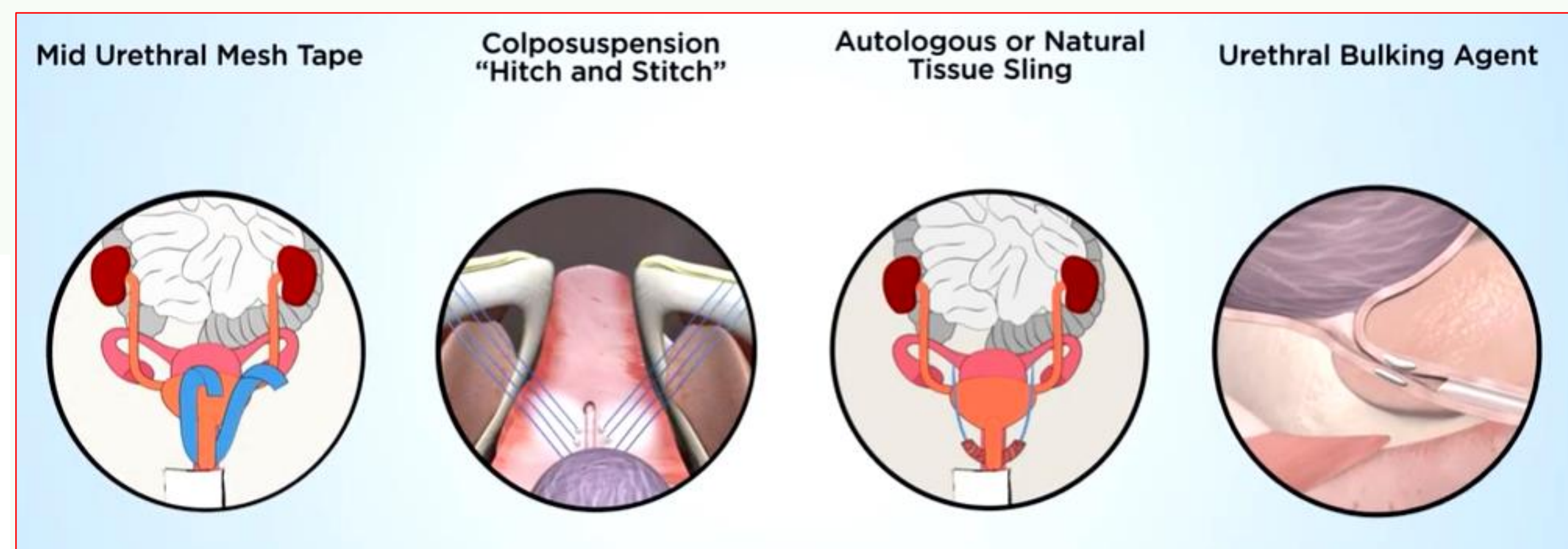


Animations of Mesh Tape procedure in the video clip

Method

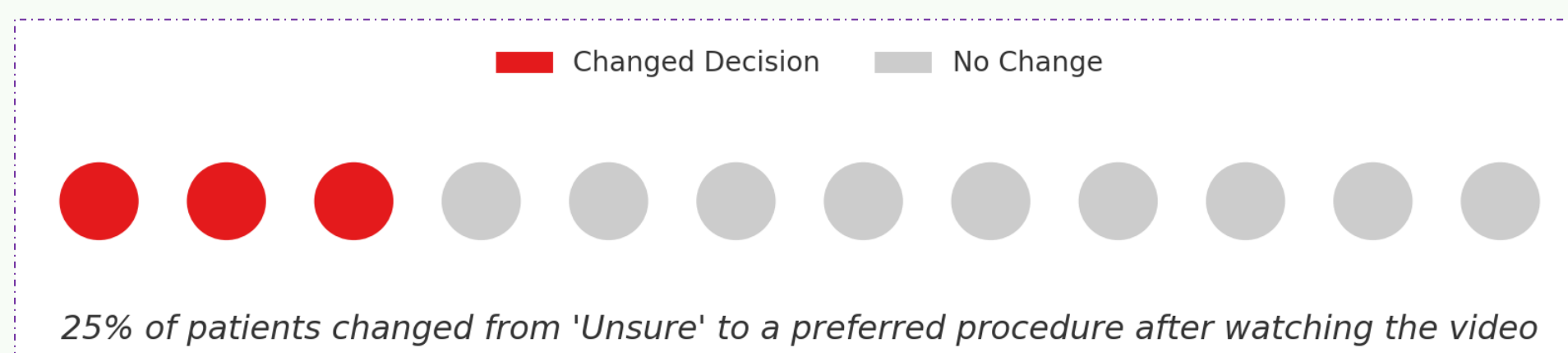
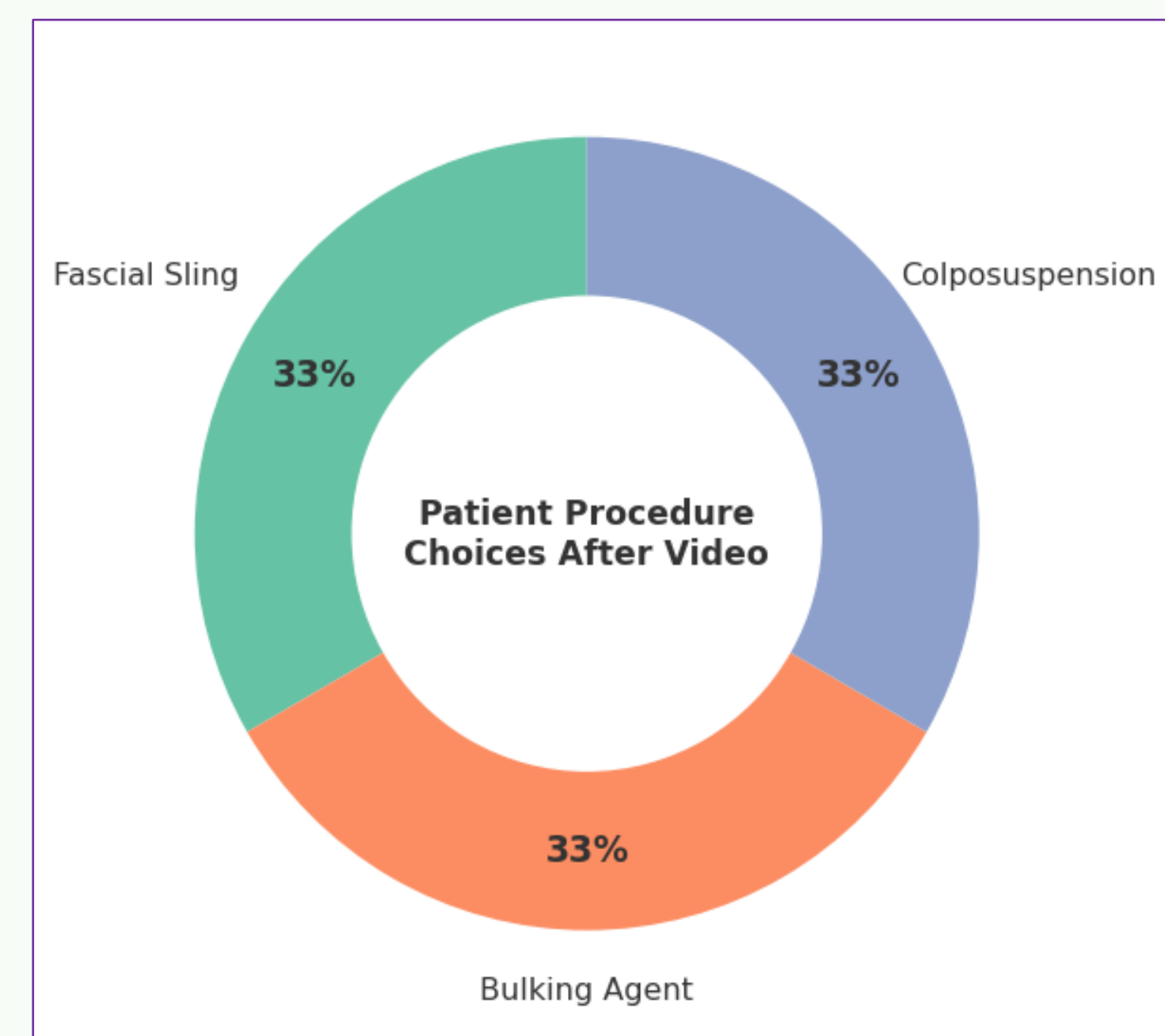
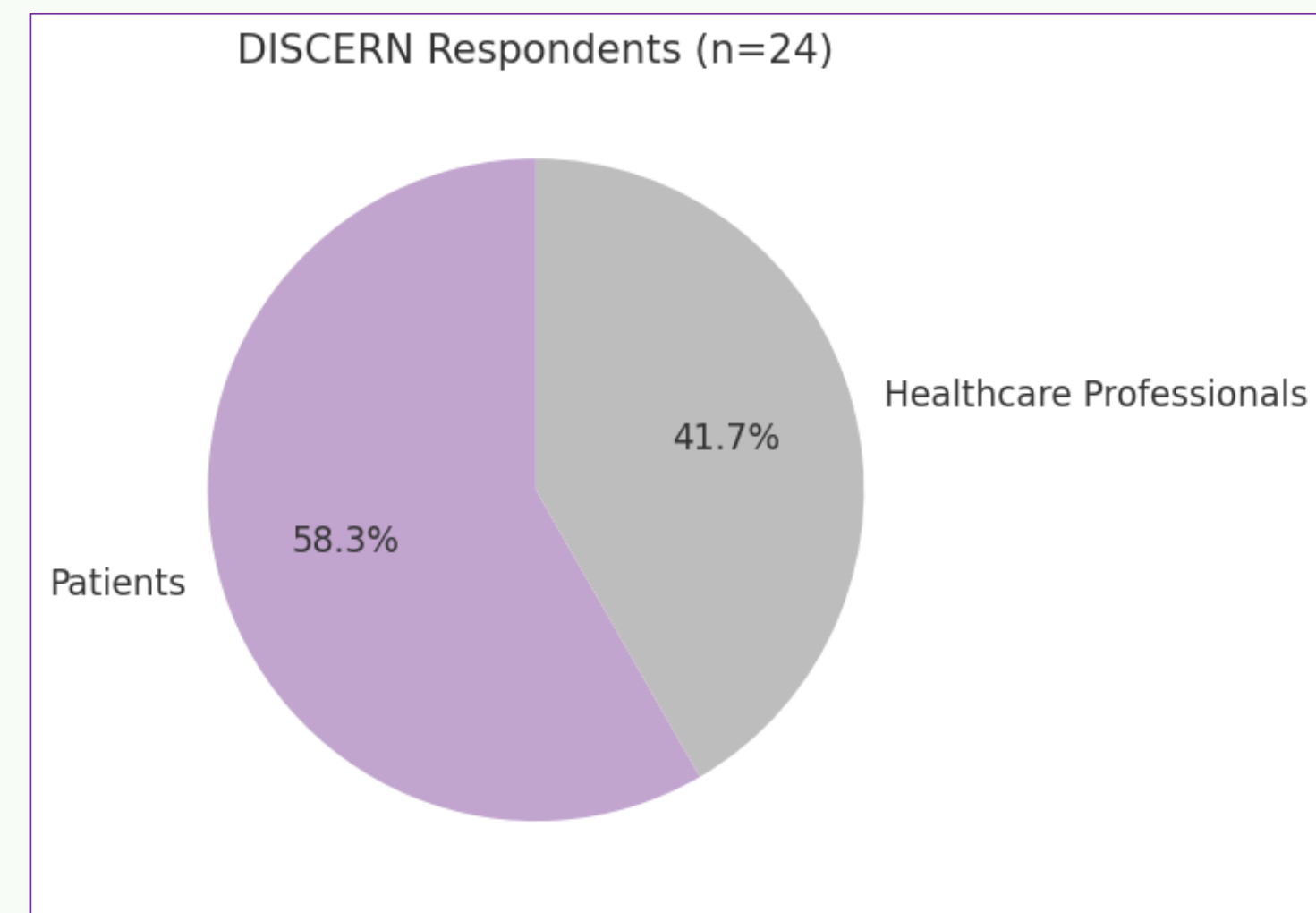
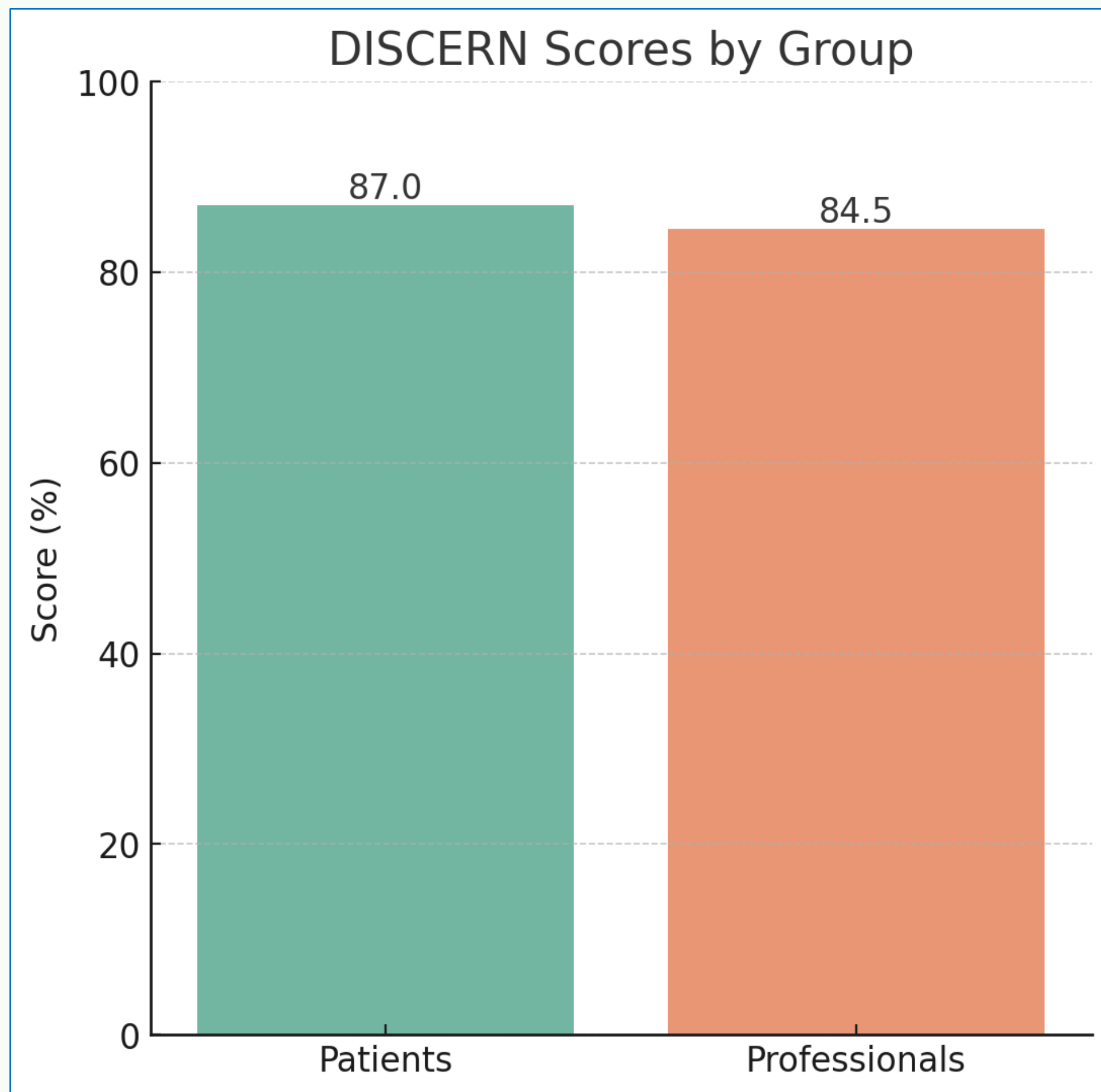
- Patients and professionals evaluated the video using the DISCERN tool (“Reliability” and “Quality” domains). Patients also completed the Decisional Conflict Scale (DCS) before and after viewing to assess confidence, values, and treatment choices.

The four different procedures featured in the video-based decision aid



Results

- Over 2 years, 24 respondents (14 patients, 10 professionals) completed the DISCERN tool. Average scores were high (patients: 87.0%, professionals: 84.5%), with the “Reliability” domain rated higher than the “Quality” one.
- The video was rated highest for clear aims and explaining treatments, but lowest for additional support info and no treatment scenarios, with notable disagreement between groups.
- Among 12 patients with DCS data, total scores improved (14.6 → 5.9), especially in uncertainty (19.4 → 7.6), indicating greater decision confidence.
- Treatment choices were evenly split across three options. Three patients (25%) moved from “unsure” to a clear decision after watching the video.



Conclusions

- Patients and professionals found the SUI-PDA video helpful for explaining procedures and reducing uncertainty. A larger multi-centre study is underway to validate its use across diverse settings.

References

- ¹Ong HL, Sokolova I, Bekarma H, Curtis C, Macdonald A, Agur W. Development, validation and initial evaluation of patient-decision aid (SUI-PDA©) for women considering stress urinary incontinence surgery. Int Urogynecol J. 2019;30(12):2013–22.

