2019

Patient Guide to Access Quality Health Information Online

Danielle Wall
University of Vermont

Follow this and additional works at: https://scholarworks.uvm.edu/fmclerk
Part of the Medical Education Commons, and the Primary Care Commons

Recommended Citation
https://scholarworks.uvm.edu/fmclerk/433

This Book is brought to you for free and open access by the Larner College of Medicine at ScholarWorks @ UVM. It has been accepted for inclusion in Family Medicine Clerkship Student Projects by an authorized administrator of ScholarWorks @ UVM. For more information, please contact donna.omalley@uvm.edu.
The Problem

There is a Proliferation of health related information online that is unregulated:

“With more than 100,000 health-related websites estimated to be in existence, Internet users may have difficulty accessing evidence-based sources and often seek information through simple search engine (eg, Google, Yahoo, Bing) queries that may prioritize sites of lower quality, undisclosed commercially sponsored content, irrelevant information, and/or at worst, misinformation.” (1)

“Despite the fact that a large number of people base important health decisions on information they find on the Internet, there is very little being done to ensure the accurate reporting of health information online. Currently, it is the responsibility of the individual site to determine the quality of health-related content.” (2)

A large percentage of patients use online search engines to access health information:

“There are an estimated 6.75 million health searches daily in Google representing 4.5% of all searches performed.” (3)

“8 in 10 online health information seekers started with a search engine (Google, Bing, or Yahoo).” (4)

Critical evaluation of online health information is generally inadequate. There is a gap between online health resources available and consumers skills for accessing and evaluating them:

“A survey conducted by the Pew Research Center found, only 15% of online health information seekers said they “always” checked the source and the publication date of the information they found online. This means that nearly 115 million Americans are gathering health information online without evaluating its quality.” (2)

“Many challenges arise especially from the low quality information content for people who might be literate enough to find, understand, and process such information and store it in their memories, but not literate enough to recognize it for what it is (false, irrelevant, or fraudulent).” (4)

The sources of online content are not available:

“A study conducted under the direction of the U.S. Department of Health and Human Services calculated that only 4% of the most frequently visited health web sites published the source of their content and just 2% revealed how the content was updated.” (2)
Public Health Concerns

Online health information impacts decisions about health care:

“53% of American respondents stated that their last Internet search impacted their personal health care in some way or the way they cared for someone else. Further, one third of e-Patients reported that what they found online specifically affected their decision whether or not to see a doctor” (2)

“It has been reported that one in every two people searching for health information online do so to self-diagnose, with the highest rates of this practice occurring in Russia, the United States, the United Kingdom, and Australia.” (2)

Misinformation online can compromise clinician-patient relationships:

“Inaccurate online health information can lead to clinicians advocating guideline-supported recommendations different from those read on reputable online sources. This mismatch of information can lead to a breakdown in trust in the clinician-patient relationship.” (5)

Misinformation tends to effect less educated and vulnerable patients:

“This is a barrier to patient education and results in those vulnerable patients who seek reliable information being misinformed. This is of greater importance to nonexpert patients (majority) who may be less able to evaluate the reliability of online information and be susceptible to the bias and inaccuracies contained within. (5)

Patients with lower levels of literacy may be unable to access and or comprehend legitimate online health information:

The readability level was also assessed for health-related websites which showed that the majority of health-related websites required high school level or above. (4)

Low-literacy adults participating in our study did not use optimal search terms to answer questions, encountered difficulties finding health information at the appropriate reading level, and were unable to successfully interpret Internet health information”. (6)

Misinformation can be harmful physically, psychologically, and financially:

“Potential for harm from inaccurate online information is significant and can be: (1) physical, from inappropriate treatments, adverse effects, or untreated disease; (2) emotional, from anxiety or false hope arising from inaccurate diagnostic, prognostic, or therapeutic information; and (3) financial, from costs incurred from unnecessary purchase of ineffective health services or products.” (7)
Community Perspective

“The internet can be very useful but also potentially harmful for patients. The majority of my patients use the internet to access health information and many come to me with inaccurate information or expectations. We need to figure out a way for patients to become more selective when choosing health information.”

-Dr. Rachel Inker, MD, Community Health Centers of Burlington

“I often use the internet to look up medications prescribed by doctors. I really don’t know anything about what makes a website credible. I usually just assume the information is correct”

-CHCB patient
Intervention and Methodology

**Intervention:** The goal is to educate patients about health information online including how to identify accurate and evidence-based information, and strategies to detect biased, misleading or potentially false information.

**Methodology:** Created a brochure that includes: a section about how to critically evaluate online information, tips to identify and avoid fraudulent or misinformation, and provided a list of credible online sources that offer resources in a variety of languages.
The pamphlet was reviewed and approved by Dr. Heather Stein and Dr. Adam Greenless for display in the Community Health Centers of Burlington, Riverside location.

Pamphlets were placed in waiting rooms for patients to look over and take home.
Evaluation of Effectiveness and Limitations

Evaluation of Effectiveness
The project could be evaluated by surveying patients who reviewed the brochure to gather data on the brochure’s efficacy and to determine if the information led to positive changes in patients online searching behaviors.

Limitations
• The 6 week timeframe was not enough to both create and evaluate the effectiveness of the brochure.
• The brochures were only displayed in one of the Community Health Center’s locations.
• Patients may be unaware of the resource given lack of advertisement.
Recommendations For Future Interventions

• Offer a course on health literacy and online health information.

• Create a mobile app that covers teaching points in the brochure.

• Work with providers so they can educate patients on online health information, and refer to pamphlet and online education tools.

• Develop online health information in multiple languages and for lower literacy levels.

• Survey patients to determine the brochure’s efficacy.
References


Thank you for agreeing to be interviewed. This project is a requirement for the Family Medicine clerkship. It will be stored on the Dana Library ScholarWorks website. Your name will be attached to your interview and you may be cited directly or indirectly in subsequent unpublished or published work. The interviewer affirms that he/she has explained the nature and purpose of this project. The interviewee affirms that he/she has consented to this interview.

Yes __X___
Name: Dr. Rachel Inker, MD