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Does ENAT-Focused Education Improve Health Outcomes in RA? A Randomised Controlled Trial

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Objectives
The aim of this study was to evaluate the effectiveness of ENAT-focused patient education on self-efficacy, health status and patient knowledge. We hypothesised that, the use of the ENAT to help focus patient education on patients’ priority educational needs, would improve their self-efficacy and health status.

Methods
This study was a pragmatic 7-centre RCT. The inclusion criteria were: a diagnosis of RA, age 18+ years and ability to complete questionnaires. Patients were randomised to either the ENAT group where patients completed the ENAT which was then used as a template by the Clinical Nurse Specialist (CNS) to meet their educational needs; or usual care by CNS without the ENAT. Patients were seen at baseline then at weeks 16 and 32. The outcomes were self-efficacy (ASES), health status (AIMS2-SF) and patient knowledge (PKQ). We investigated between-group differences (t-test) and trends over time (repeated measures ANOVA). Intention-to-treat results are reported (multiple imputation for missing data) except AIMS2-SF-Work data, where complete case analysis was used for patients who were working.

Results
A total of 132 patients were recruited, 70 EG (53%) and 62 UC (47%). Their mean (SD) age was 54 (12.3), 56 (13.3) and disease duration 5.2 (4.9), 6.7 (8.9) for EG and UC respectively. Questionnaire completion rates (EG, UC) were; 97%, 97% (baseline) 90%, 85% (week 16) and 79%, 76% (week 32).

Significant between-group differences were found, in favour of the EG at week 32 in ASES-Pain, mean difference (SE) = -4.36 (1.6), t = -2.72, P = 0.008; ASES-Other symptoms, mean difference (SE) = -5.84 (3.06), t = -3.07, p = 0.003; AIMS2-SF Symptoms, mean difference (SE) = 1.04 (0.41), t = 2.54, p = 0.013 and AIMS2-SF Affect, mean difference (SE) = 0.86 (0.30), t = 2.84, p = 0.006. Between-group differences were not significant in other time-points or in the total PKQ score.
Table 1 presents within-group changes over time. Scores are mean (SD) after multiple imputations. The ENAT group showed significant improvements in most outcomes while usual care showed significant improvements only on AIMS2-SF work.

Table 1

<table>
<thead>
<tr>
<th>Outcome measure</th>
<th>Usual care (n=60)*</th>
<th>ENAT group (n=68)*</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Baseline</td>
<td>Week 16</td>
</tr>
<tr>
<td>ASES-Pain</td>
<td>25.3 (11.2)</td>
<td>26.5 (10.2)</td>
</tr>
<tr>
<td>ASES-Other sympt.</td>
<td>34.2 (12.7)</td>
<td>35.0 (13.9)</td>
</tr>
<tr>
<td>AIMS2-Physical</td>
<td>3.1 (2.6)</td>
<td>3.0 (2.3)</td>
</tr>
<tr>
<td>AIMS2-Symptoms</td>
<td>5.0 (3.2)</td>
<td>4.6 (3.1)</td>
</tr>
<tr>
<td>AIMS2-Affect</td>
<td>3.7 (2.1)</td>
<td>3.8 (1.9)</td>
</tr>
<tr>
<td>AIMS2-Social</td>
<td>5.5 (1.7)</td>
<td>5.5 (1.7)</td>
</tr>
<tr>
<td>AIMS2-Work*</td>
<td>2.0 (2.7)</td>
<td>3.4 (3.5)</td>
</tr>
<tr>
<td>Total PKQ</td>
<td>8.6 (2.4)</td>
<td>8.7 (2.3)</td>
</tr>
</tbody>
</table>

* Missing data imputed except for AIMS2-SF-Work for 59 patients who were working

Conclusions
This is the first study to report the effects of ENAT-focused education in people with RA, suggesting improvements in self-efficacy and aspects of health status.

Disclosure of Interest
None declared


http://dx.doi.org/10.1136/annrheumdis-2014-eular.3541/