Effectiveness of a health literacy intervention targeting kidney patients and professionals

Marco Boonstra

MD Boonstra1, MS Gurgel do Amaral1, GJ Navis2, ME Stegmann3, R Westerhuis2, AF de Winter1, SA Reijneveld1
1Department of Health Sciences, University Medical Center Groningen, Groningen, Netherlands
2Department of Nephrology, University Medical Center Groningen, Groningen, Netherlands
3Department of General Practice and Elderly Care, University Medical Center Groningen, Groningen, Netherlands

Contact: m.d.boonstra@umcg.nl

Background:
Chronic kidney disease (CKD) patients with limited health literacy (LHL) experience a faster kidney decline. To counteract this, we developed Grip on your Kidneys (GoyK). This intervention targets patients’ communication and self-management. It trains health care professionals (HCPs) competences to support patients with LHL. This study aims to test the effectiveness of GoyK on patients’ health and self-management, HCPs’ communication competences, and the quality of consultations.

Methods:
A clustered and non-blinded quasi-experimental study was conducted, including 161 patients with mild to severe CKD and 48 HCPs from Dutch general practices and nephrology clinics. Patients (n = 77) and HCPs (n = 30) in the intervention group received GoyK. In the control group, patients (n = 76) had routine visits with HCPs (n = 19). Between March 2021 and June 2022, data were collected with questionnaires and from patient records at baseline (T0), 4 months (T1) and 9 months (T2). Primary outcomes were patients’ self-management and HCPs’ use of health literacy communication strategies.

Preliminary results:
At T1, the intervention improved the days per week patients exercised (B = 1.00, 95% confidence interval, CI = 0.35-1.65, p = 0.003), and Likert-scale reported (1-4) fluid intake (B = 0.37, CI = 0.10-0.63, p = 0.006). The intervention had a positive effect on several outcomes related to how patients perceived the consultation quality, and improved the reported use of communication strategies by HCPs at T1 (B = 0.68, CI = 0.35-1.01, p = <0.001). We found no effects on other patient outcomes, like activation for self-management or salt intake.

Conclusions:
Our health literacy intervention, targeting CKD patients with LHL and HCPs, improved lifestyle behaviors of patients and the quality of consultations. A further strengthening of other self-management behaviors and on HCPs’ competences is needed, also to reach sustainable effects in the care for patients with LHL.

Key messages:
• A health literacy intervention, targeting patients and professionals simultaneously, improved the patients’ self-management and care consultations.
• Training of HCPs improved their competences to support patients with LHL, and care organizations and studies need to implement education on this topic.