Transferring Patient-Reported Outcomes from Clinical Research to Clinical Practice: Possibilities and Challenges

Abstract:
In recent years there has been growing interest in the use of structured, standardized patient-reported outcomes (PROs) in daily clinical practice as an aid in detecting physical and psychosocial problems that might otherwise be overlooked, in monitoring disease and treatment effects, and in improving the quality of care. The provision of timely, systematic information derived directly from patients about their physical and psychosocial health has been hypothesized to have a salutary effect, to a greater or lesser degree, on a cascade of outcomes including: patient-health care provider communication; providers’ awareness of patients’ health problems, patient management (e.g., referral patterns, medication prescription, counseling, etc.), patients’ and health care providers’ satisfaction with care, and patients’ health-related quality of life (HRQL) over time. To date, the greatest impact of PRO data has been on the more proximal outcomes, including communication and awareness levels. There is less evidence supporting the impact of PROs on more distal but arguably more important outcomes such as patients’ satisfaction and HRQL over time.

This paper will address the rationale for using PROs in clinical practice, will provide several examples of clinical trials that have assessed the impact of PROs on a range of clinical processes and outcomes, and will suggest ways in which interventions can be strengthened to ensure the optimal use and impact of PROs on the processes and outcomes of care. These include providing condition-specific information on symptoms and functional outcomes rather than generic PRO data only, presenting PRO data in an easily accessible and understandable manner, training health care professionals in the interpretation of PRO data, establishing cutoffs for clinically relevant changes in symptoms and functional outcomes over time, and coupling PRO data with practice guidelines and clinical pathways.