Table G-6. Key Question 3, second outcome

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| **Author,Year** | **Groups**  | **Outcome #2, Exact Measure Used**  | **Timing of Measurement,****Data Source**  | **N analyzed for This Outcome**  | **Results by Group** | **Differences in Groups**  | **Statistical Methods Used, Covariates Controlled for in Analysis**  |
| Longman 29124 | G1: Risk estimate as a point (precision)G2: Risk estimate as a small range (precision)G3: Risk estimate as a large range (precision) | Perceived risk, assessed using 3 items: (1) ‘‘How likely do you think it is that you will develop temporary facial skin discolorationas a result of taking Drug A’’ (2) ‘‘Based on your feelings how big is the chance of you developing temporary skin discolorationas a result of taking Drug A?’’ (3) What do you think the chance is of you developing temporary skin discoloration as a result of taking Drug A compared to an average man/woman your age?’’ Responses were given on a 7-point scale (e.g. 1 = very low to 7 = very high). | Immediate posttestSelf-report | N=120 | Mean perceived risk, overall: NRMean perceived risk, by risk information source.Doctor as risk information source:G1: 3.67 (3.39, 3.95)G2: 3.80 (3.52, 4.08)G3: 4.03 (3.75, 4.31)Pharmaceutical company as risk information source:G1: 3.53 (3.24, 3.81)G2: 3.66 (3.75, 3.94)G3: 3.88 (3.60, 4.17) | Risk format was significantly associated with perceived risk: χ2 = 16.97, df = 2, p<0.001G2-G1:Mean difference: 0.1395% CI: -0.04, 0.30G3 -G1:Mean difference: 0.36 95% CI: 0.19, 0.53G3 -G2:Mean difference: 0.2395% CI: 0.06, 0.40 | Within subjects correlation of responsesChi-squared; Mixed regression models |

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| McCormack et al., 20115 | G1: control (no treatment control)G2: Prostate-Only (Net benefit)G3: Men’s Health (Net benefit in context of other more beneficial services) | PSA in the 12 months since the intervention. Participants were asked if they had a PSA test in the last year | 12 months Self-report | Overall N=355G1: 118\*G2: 85\*G3: 152\* | G1: 76, 64%G2: 60, 71%G3: 93, 61% | Difference G3-G2: -10%\*p=NR G2-G1: 7%\*p=NRG3-G1: 3%\*p=NR | Absolute differences & Logistic regression (not reported)NR |
| Perneger et., al., 20106 and 20117 | G1: control = minimal risk info, minimal benefit infoG2: minimal risk info, moderate benefit infoG3: minimal risk info, a lot of benefit infoG4: moderate risk info, minimal benefit infoG5: moderate risk info, moderate benefit infoG6: moderate risk info, a lot of benefit infoG7: a lot of risk info, minimal benefit infoG8: a lot of risk info, moderate benefit infoG9: a lot of risk info, a lot of benefit infoEach participant received varying information about the benefits and harms of a screening test for an unnamed cancer. | Health-related decisions or behavior (applicable for general public/patients) Test refusals (yes/no): % | Given in postal surveySelf-report | N=2333 | Test Refusals:G1: 11.6%G2: 5.3%G3: 10%G4: 16.1%G5: 21.7%G6: 18.8%G7: 22.3%G8: 23.2%G9: 20% | OR for test refusalMinimal risk info: 1.0Moderate risk info (FP): 2.5 (1.8 to 3.4)Lot of risk info (FP + FN): 3.0 (2.2 to 4.2)Minimal benefit info: 1.0Mod benefit info (survival): 1.0 (0.7 to 1.3)Level of benefit info (survival and reassurance): 1.0 (0.7 to 1.3) | Chi square tests, logistic regressionRisk benefit information, health status, medical decision in past 6 month, screening in past 3 years, attitude toward screening, desire for information, desire for autonomy |

Table G-6. Key question 3 second outcome (continued)

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| **Author,Year** | **Groups**  | **Outcome #2, Exact Measure Used**  | **Timing of Measurement,****Data Source**  | **N analyzed for This Outcome**  | **Results by Group** | **Differences in Groups**  | **Statistical Methods Used, Covariates Controlled for in Analysis**  |
| Schwartz et al., 20118 | G1: control: No explanation of heart drug or heartburn drugG2: Nondirective explanation of heart drug or heartburn drugG3: Directive explanation of heart drug or heartburn drugEach participant sequentially randomized to 1 0f 3 groups for heart drug and then for heartburn drug | Health-related decisions or behavior (applicable for general public/patients) Choice of the better drug- one that had been on the market longer | Immediately following interventionSelf-report | Overall N=2944G1: 981G2: 982G3: 981 | Heartburn drug:G1: 34%G2: 53%G3: 53% | Heartburn drug:G1-G2 Difference: 19 %95% CI: 13-124p=NRG1-G3 Difference: 19 %95% CI: 13-24p= NR | Unclear- use the SVY series of commands- and postestimation commands for CIUsed poststratification weights to account for sampling strategy which adjusted for demographic characteristics |

Table G-6. Key question 3 second outcome (continued)

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| Sheridan 20129 | G1: Educational video on highway safety (control)G2: Video-based decision aid and coaching session for patients (net benefit)Combined analysis of two trials in which G2 includes prostate only information or prostate information framed in the context of other men’s health services. | How much were you involved in the decision about whether or not to get a PSA test today?” Responses were provided on a 6-point Likert scale: I decide; I decide after considering the doctor’s opinion; doctor and I decide together; doctor decides after considering my opinion; doctor decides; we talked about the PSA test, but didn’t make a final decision. | Measured after visit with doctorSelf-report | Total N=89G1: 51G2: 38 | % of men reporting shared decisions, postvisit G1: 76%G2: 74% | G2-G1: Absolute difference: -2%95% CI: -21% to 15%RR: 0.9695% CI: 0.67 to 1.15 | Combined data from two randomized controlled trials so adjusted for random effects of physician and practice (Fully adjusted RR)Mixed effects logistic regression |

Abbreviations: FN=false negative; FN=false positive; G = group; N=number; OR = odds ratio; PSA = prostate-specific antigen; SVY = survey.