

RAISING AWARENESS . . . STARTING THE CONVERSATION

USING SHARED DECISION MAKING TO TREAT VULVOVAGINAL ATROPHY

Primary Goal to change clinician behavior to increase identification and appropriate management of symptomatic VVA that results in improved quality of life for women ages 35-80

PARTNERS

- Wisconsin Research and Education Network
- Duke Primary Care Research Consortium
- Interstate Postgraduate Medical Association
- Emmi Solutions
- A Women's Touch



PROCESS

- Clinician and Staff Education
 - Spaced Education
 - Academic Detailing
 - Practice Facilitation
- Patient Engagement
 - Online Shared Decision Aid
 - Waiting room materials
 - Exam room materials

16 individual clinics participated.

146 clinicians and staff received education.

346 patients referred into study. 130 completed study.

Results

AIM RESULTS

Preliminary results show a change in clinician self-reported behaviors

- The percentage of clinicians who agreed/strongly agreed with screening for VVA increased from **41.9% to 74.2%** pre and post survey
- The percentage of clinicians who agreed/strongly agreed with adding VVA to the problem list increased from **51.6% to 74.2%** pre and post survey

PROCESS RESULTS

PATIENTS

- 76% recommend using the internet VVA program. 85% recommend the VVA shared decision making (SDM) process.
- Patients reported a reduction in vaginal dryness during intercourse, pain with intercourse, and vulvar itching/burning.

CLINICIANS

- 81% intend to use the internet VVA program with patients
- 97% intend to use SDM with patients with symptomatic VVA
- 84% intend to use SDM with patients with other diagnoses

IMPACT

Our methods of education and facilitating practice change were successful in a variety of practice sites in multiple health systems located in 2 states, in 2 regions of the country, suggesting our results can be generalized and reproduced elsewhere.

