Effectiveness versus convenience: patient preferences for an erythropoietic agent to treat cancer-related anemia.


Source
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Abstract

OBJECTIVE:

To assess patient preferences across two attributes—effectiveness and convenience—in the selection of an erythropoietic agent to treat chemotherapy-related anemia.

METHODS:

During 2004, 500 adults with solid tumors and anemia were recruited through 50 oncologists' offices across the USA. Data were collected through self-administered questionnaires, divided into two parts. The first, completed by the provider, captured clinical information and providers' perceptions of patient preferences. The second, completed by the patient, recorded knowledge, experiences, and preferences regarding anemia and its treatments. Patient preferences, the relative importance of effectiveness (time to noticeable relief of fatigue) and convenience (number of provider visits required in an 8-week period), were measured using a choice-based conjoint (CBC) analysis. Each attribute was assessed at three levels (4, 6, or 8 weeks/visits).

RESULTS:

467 providers (93%) and 438 patients (88%) completed the preference sections. When choosing a medication to treat anemia, 77% of providers viewed effectiveness as more important to patients than convenience. Similarly, patients had a greater preference for effectiveness than convenience. Relative preference weights were significantly higher for 4- versus 6-week effectiveness (0.61 vs. 0.09, p < 0.001) and 6- versus 8-week effectiveness (0.09 vs. -0.70, p = 0.004). Overall, time to effectiveness was twice as important to patients as the number of visits.

LIMITATIONS:

Only two attributes were included in the CBC, which did not control for bias from respondent characteristics or experiences.
CONCLUSION:
When evaluating an erythropoietic agent to treat chemotherapy-related anemia, both providers and patients view effectiveness as more important than convenience.

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