

Final Study Report-Study Reference: EUPAS23991**"Shared decision making in patients with surgical or non-surgical medical disorders in a General Hospital: A pilot study"**

Background: The differential engagement in Shared Decision Making (SDM) of patients undergoing surgical treatment versus those treated non-surgically has not been directly researched. We therefore investigated whether, in a general medical hospital, patients who were treated surgically (SurT) participated more in medical decisions compared with those suffering from medical disorders and had not undergone surgery (NonSurT).

Methods: The 9- Item SDM Questionnaire (9-SDMQ) was administered in two patient groups treated in a General Hospital (SurT: N=32, NonSurT N=72). The primary outcome was the group difference in 9-SDMQ % scores adjusted for age, education, maternal education and cognition.

Results: Surgically-treated and male patients scored higher (adjusted mean difference-AMD=23.286, 95% confidence interval-CI=12.42, 34.16, $t=4.26$ $p < 0.001$, effect size: $f^2=0.213$ and AMD= 13.46, 95%CI=4.98, 21.93, $t= 3.16$, $df=83$, $p < 0.002$, respectively). Each year of patients' education was associated with 2.91 % scores reduction ($p < 0.001$). Patients' maternal education and physicians' age were positively correlated with 9-SDMQ scores. We failed to find any cognitive effect on SDM. Negative correlations among 9-SDMQ and satisfaction from services were revealed.

Conclusion: SurT patients engaged more in medical decisions. Engagement was increased in male patients born to better educated mothers and treated by older

physicians, but was negatively correlated with patient's years of education and with aspects of their satisfaction from services.

Practice Implications: Engagement of NonSurT patients in SDM should be increased through educational initiatives.