


Recommendations

1. Interactive elements in health information

	<p>Recommendation</p> <p>“Interactive elements may be used in health information.”</p> <p>Agreed: 9, Disagreed: 0, Abstentions: 1</p> <p>Quality of the evidence: moderate quality</p>
<p>Comment on the recommendation:</p> <p>The recommendation refers to the comparison of health information without and with additional interactive elements.</p> <p>This comparison showed a positive effect for health information with interactive elements in one study on the cognitive outcome <i>risk perception</i> and in two of six studies on the outcome <i>knowledge</i>.</p> <p>Positive effects for the use of interactive elements could be shown in two of three studies on the affective outcomes <i>acceptance / attractiveness</i>. The third study points to an effect in favor of interactive elements.</p>	

Summary of the findings

Characteristics of the included studies


For this comparison six studies with a total of 1,555 participants were included (3-6, 10, 11). In the studies computer-supported health information with interactive elements was tested against videos (4), printed matter (3, 6, 10) and computer-supported information without interactive elements (5, 11). The interactive elements consisted of integrated knowledge issues (4, 6), games and sound/video sequences (3), personalized risk presentations (and value clarification tools) (11), and dynamic avatars (5). Content information was provided on the consequences of alcohol misuse (4), anticoagulant therapy for atrial fibrillation (10), cancer respectively cancer screening (3, 6), prenatal tests (11) and Type 2 diabetes (5).

All of the studies were carried out in the USA and included different age groups (3-6, 10, 11). Included in one study each were adolescents aged between 12-18 years (3), pregnant women (11) and African-Americans of both sexes (6).

Results on the relevant outcomes

No clear effects could be seen for the cognitive outcomes (11) (3-5, 10). For the outcome *acceptance / attractiveness* positive effects or tendencies were shown for interactive elements.

2. Facts boxes

	<p>Recommendation</p> <p>“Health information may be presented as facts boxes.”</p> <p>Agreed: 9, Disagreed: 0, Abstentions: 0</p> <p>Quality of the evidence: high quality</p>
<p>Comment on the recommendation:</p> <p>The recommendation refers to the comparison of facts boxes and short summaries for medications (American advertisements).</p> <p>For this comparison a positive effect on the cognitive outcomes <i>risk perception / knowledge</i> was shown in one study in favor of facts boxes. This effect was also found for <i>comprehensibility / readability</i>.</p>	

Summary of the findings

Characteristics of the included studies

For this comparison two randomized-controlled studies (*symptom & prevention trial*, two studies in a journal (12)) were included with a total of 518 participants. These studies were conducted in the USA and were supplemented by a survey (7, 12). The intervention was a compact presentation (facts box) on therapeutic-medicinal measures (H2 blockers or proton pump inhibitors for acid indigestion) or preventive-medicinal measures (statins or Clopidogrel for secondary prevention of cardiovascular events) (12). The facts box supplied basic information about the medication and presented in a table the likelihood of a benefit or harm occurring through the drug, using numerical formats which laypersons can understand. The control intervention consisted of the short summaries of medications that the *American Food and Drug Administration* require as mandatory for advertisements addressed directly to patients and which do not stipulate any standardized information about benefits and harm.

Results for the relevant outcomes

Positive effects in favor of the facts box were shown for the outcomes *risk perception / knowledge and comprehensibility / readability* (7, 12).