

# Peoples' experience of shared decision making (SDM) in Musculoskeletal (MSK) physiotherapy; a systematic review and thematic synthesis.

Lane, J. and Soundy, A. (2020)

## Introduction

- SDM improves prudence, self efficacy and empowerment.
- Use in MSK physiotherapy lacks clear evaluation
- No past reviews looking at conditions needed for successful SDM in MSK physio
- Research is needed to understand trust, communication and empowerment

**Aim:** to understand peoples' experiences of SDM in MSK physiotherapy, to understand the conditions needed for successful SDM

## Methods

- Systematic review and thematic synthesis
- PRISMA and ENTREQ reporting
- Subtle realist paradigmatic view assumed
- Eligibility criteria SPIDER:  
S: people accessing MSK physio, PI: SDM (collaborative relationship, both impact decisions, persons' preferences integral to process), D: all design types E: peoples' first hand experiences of SDM R: quantitative, qualitative and mixed methods
- Systematic search performed up to April 2020
- COREQ and critical discussions used to assess quality of studies

## Results

- Of 1507 studies, 9 qualitative studies were included from various countries and healthcare settings
- Most wanted to participate in SDM (1)
- Trust in the physiotherapist could be both a barrier and facilitator to SDM (1, 2)
- Collaborative, two way communication was essential for SDM (1, 2)
- For SDM to occur, people need decision support, and to share power (1)

**People want Shared Decision Making, and MSK physiotherapists have a responsibility to support peoples' confidence and capability to participate**

## Discussion

- **Trust** can influence participation in SDM across healthcare (3) and is reflected in this review (1, 2). Physiotherapists should aim to develop **mutual** trust to avoid the negative influence unilateral trust can have on SDM
- **Two way communication** is integral, and is mirrored across healthcare (3). Physiotherapists should share information, and employ empathic communication
- Clinicians can block people from participating in decision making; physiotherapist need to be **willing to share power**.

## Limitations

- Search limited to English; may affect applicability outside English speaking settings
- Subjectivity in qualitative research; to negate this, followed ENTREQ guidelines, and employed transparency and reflexivity
- Low COREQ scores for some articles, but all included due to merits of conceptual development and plausibility of results

## Conclusion

People want to be involved in decision-making. They want their preferences to inform rehab. People's capacity and confidence to participate can be influenced by two way communication, mutual trust and the willingness of physiotherapists to share power.

