



Introducing the concept of consumer health information to Romania

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Abstract

Although in many developed countries the concept of consumer health information is now well established with government support through policy and strategy documents, in Romania there is a noticeable absence of any activity in this field. Due to this absence of action and even basic informational elements on which possible strategies and programmes could be built, it appeared that the concept of a research project between medical information specialists in Romania and the UK, given the experience and positive actions undertaken in the UK might be started. This research would start from a comparison of the medical systems in those two countries and the way that patients are handled and how they get their health information. From there a number of proposals for potential solutions for the improvement of the situation in a country like Romania could be put forward. Starting from a position of the library not being considered as a place from where patients could get health information, this research will aim to place the library at the centre of an improved system of health information for patients. This paper will present the first phase of this project which has already taken place and consisted in an interview based study with patients aimed at identifying their level of health literacy, the possibility of access to information, their informational behaviour, the degree of satisfaction with their health information needs and their attitudes towards the library or specialized information as a place for the fulfilling of their informational needs.

Introduction

A trend that has been registered over several years in most developed countries is that through empowering consumers of health services by providing them with information there is an improved quality of life for them as patients. As an example, in the U.K., consumer health information has been available since the 70's and is now considered essential for the empowerment of patients in decision making about their own health. In the beginning it was available from a few dedicated sites, mostly run by librarians, but has now become a major strand in government health policy. Indeed services such as NHS Direct and NHS Choices allow patients to make informed choices about treatment and even which doctor to consult.

These developments prove that through information provision patients can make better informed decisions about their diseases, their treatment and health care generally. There is an emphasis on facilitating this for health services consumers, making available to them varied and multiple information sources which can help them in making decisions and educating them about dealing with their diseases and possible treatments.

Patient empowerment is possible only if there are informed patients. And this should be the starting point for any initiative which aims at increasing the satisfaction level of health services consumers. They must know they have the right to information. Access to information is therefore key in this regard.

Information services and programmes for consumers of health services and the facilitation of their access to health information can be built by involving libraries and information specialists who can contribute their knowledge of searching and retrieving information in massive collections, with their expertise in information literacy campaigns. For many individuals the lack of IT abilities and even of equipment, no matter which country they live in and its level of development, is still an obstacle in accessing the information they need.

Libraries and information services can inform the citizens about their rights as consumers of health services. They are institutions that can provide information and access to information for all types of health services consumers. They can provide certain, precise, current and trustable information. They can develop public education programmes for the health area, but also information programmes on specific health topics of general interest. But first of all consumers of health services must know that they can go to libraries in order to get the information they need. Even if they have the equipment and the necessary abilities, many have difficulty finding the information they need and don't have the certainty that what they find is trustworthy or the capacity to evaluate the quality or authority of that information. An information specialist can filter the information retrieved, for example on the Internet across multiple different sites.

Empowering patients in Romania

In Romania, such an initiative, for assisting consumers of health services was considered viable by the authors but that the project should involve more partners like the Ministry of Health, Public Libraries, as information centres for the community, the Association of the GPs, medical academic libraries, as for example the Central Library of the "Carol Davila" University of Medicine and Pharmacy and should include all citizens. Beginning with understanding the patient profile it also should consider the necessity of basic training of librarians and information specialists in the health area. Initially it would be useful to run a small scale pilot project.

Romanian consumers of health services need to know the rights they have and from the perspective of this project, especially the right to information. The role of libraries and information services and information professionals can be a major one here. The main problem in Romania is the fact that few individuals consider the library as a place from where they, as patients, are able to get health information so one of the main objectives of this project is to place the library at the centre of an improved system of health information for patients.

Patients rights in Romania. Actions and Programmes in this area

Concerning legislation, in Romania in March 2003, the Law no. 46, known as the Patient Rights' Law came in force. The aspects to which this law refers are the patient's right to medical information, patient consent concerning medical intervention, the right to confidentiality of information and the privacy of the patient, patient rights in the field of reproduction and the patient's rights to treatment and medical care.

Since 1994 Romania has adhered to the Principles of Patient Rights in Europe, on the occasion of the consultations organized by the WHO in Amsterdam. Among these rights there is also the right to information. The Law no. 46 refers to the rights outlined by the WHO making the necessary alignment with the situation in the Romanian health system.

The appearance of the law was considered progress at the time, despite the fact that for the application of its stipulations there was necessary a series of other distinct regulations which should concern all the direct and indirect participants in the medical act or in the insurance of the population's health in general. (1)

Chapter two in Law no. 46/2003 outlines the patient's right to medical information and has nine articles which refer to the following aspects:

- the patient right to be informed about available medical services, how to use them, the identity and professional statute of the health services providers;
- the hospitalized patient has the right to be informed about the rules and habits he has to abide by during the period of hospitalization;
- the patient has the right to be informed about his health state, about the proposed medical interventions, about the potential risks of every procedure, of the existing alternatives to the proposed procedures, and what can happen if the treatment and

- the medical recommendations are non-observed, about the diagnosis and the prognosis and he has the right to decide if he still wants to be informed in the case when the information could cause suffering to him, and he has the right to ask not to be informed and to chose another person that should be informed in his place;
- the patient relatives and friends can be informed about the evolution of the investigations, diagnosis and treatment if the patients agrees;
 - the patient has the right to ask and get another medical opinion and to get when leaving the hospital a written abstract of the investigations, diagnosis, treatment and care during the period he was hospitalized;
 - the information must be given to the patient in a respectful, clear language that he can understand. (2)

The National Association for Patient Protection was set up in June 2008 in Romania, its main objective being to ensure that no patient is refused the right:

- to the highest quality medical care, which is the right to be competently treated;
- to be respected as a human being;
- to consent on the medical intervention;
- to medical information, which is the right to be correctly informed;
- to confidentiality of information;
- to be completely reimbursed for the material and moral prejudices which he is caused (medical malpractice, administrative deficiencies etc.). (3)

This Association wants to achieve real protection for patients by providing them with verified information and medical, social, religious and legal assistance and also through education programmes for health. It also wants to offer an alternative for supporting patients and their families who have suffered or where their rights as patients were infringed. The Association has a site that was built to offer patients and their families information about their rights. (3)

In the area of non-governmental organizations there have been a series of initiatives covering the medical field. As an example a campaign started in June 2007 about patient rights and the dangers of the irrational auto-medication called *A New Attitude!* (In Romanian *O 9 Atitudine!*) and organized by the National Association for Consumers Protection and Promotion of Programmes and Strategies in Romania in partnership with the Ozone Foundation.

They produced different flyers with information on how to get compensated or how to get free drug prescriptions, the rights and obligations of insured persons, how to make an efficient complaint, rational auto-medication etc. This was meant as an information and education campaign for the population so that when they have a problem in the health area they know what to do, whom to address and not to ignore the situation. (4)

A report analyzing the information level of the patients in the European countries, released on 31 March 2009 at Bruxelles, *The Empowerment of the European Patient - Options and Implications*, produced by Health Consumer Powerhouse puts Romania in place 30 out of the 31 countries included in the report. The report is structured on four

main sub-disciplines: Patient rights, Information to patients, Health Technology Assessment and Financial incentives.

So, Romanian patients are among the least informed patients in Europe. The reasons for Romania being situated so low in this classification are caused both by the lack of financial incentive which could support informed decisions and by the lack of information and involvement of patients in the process of decision making.

The report shows that the Romanian patients need information about the health system that is easily understood through an online or phone information system, 24 hours a day/7 days a week, which also offers physician listings and a quality classification catalogue in order to facilitate the choosing of physicians and hospitals. The authors of the report consider that these measures would help in the process of transforming the patients to active partners in the health system. (5, 6)

Context of this research

As a first phase of the research project started by the authors for empowering patients in Romania, an interview based study with patients took place because we considered we must have information about Romanian patient profiles.

We also decided to undertake a smaller study at the level of physicians, based on a questionnaire, so that we could have their perspective on the matter of patient provision with information.

For the study we decided to include both hospitalized patients and patients that come to their GP.

Setting

The research took place:

- within the General Surgery Clinic that is part of the Witing Clinic Hospital in Bucharest during the period February-April 2009. The Clinic has 75 beds and is equipped for classic, laparoscopic, and endoscopic interventions of all kinds of general surgery and plastic and reparatory surgery. (7) In 2008 there were around 2950 patients hospitalized for investigations or interventions.
- and within two individual GP practices that each has around 2000 patients.

Objectives of the research

The research had 5 main aspects. To identify:

- their level of health literacy,
- their access to information,
- their informational behaviour,
- the degree of satisfaction with their health information needs and

- their attitudes towards the library or specialized information as a place for the fulfilling of their informational needs.

Methods of data collection

The study was undertaken between 20th February and the 19th April 2009.

All data collected for this study were obtained through short interviews (not more than 10 minutes) with patients. The questions on which the interviews were based are presented in Appendix 1.

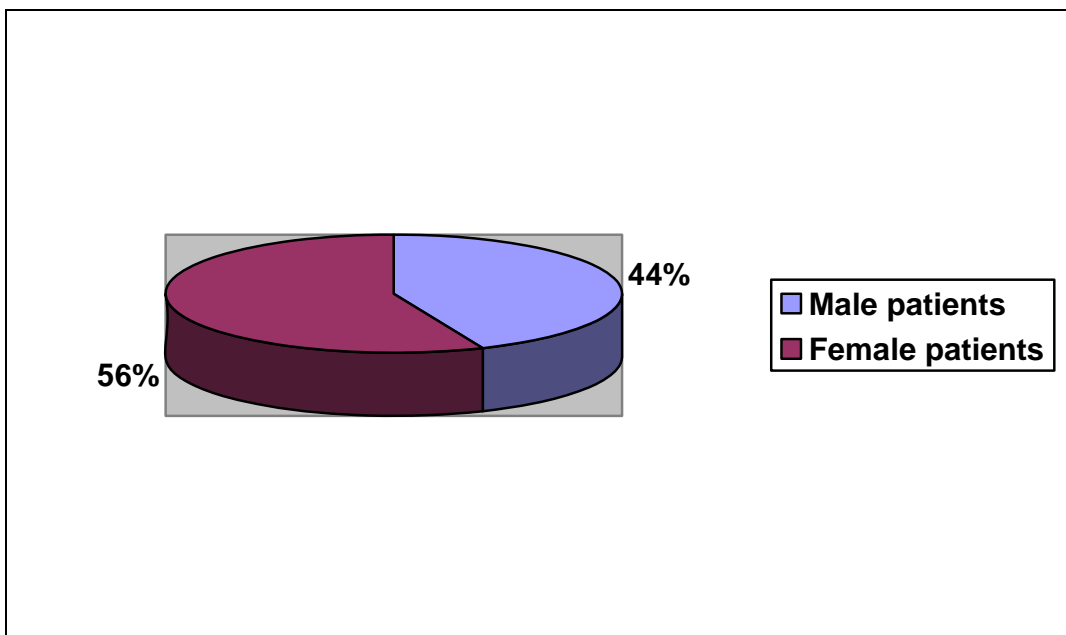
Participants for this study were the patients hospitalized in the General Surgery Clinic of the Witing Hospital in Bucharest and the patients that visited their GP during the days when the interviews took place.

Overall interviews were undertaken with 190 patients: 46 surgical patients and 144 GP patients. Very few patients refused to participate in this study. For example, in the Surgery Clinic only 5 patients refused the interview, some because there were not feeling too well, and 9 patients were in a physical state in which you could not discuss with them and we didn't even try.

Analysis of the results

The questions put during the interviews were aimed at the objectives mentioned earlier.

The sex distribution of the interviewed patients was 83 male patients and 107 female patients.



The age distribution of interviewed patients was as follows:

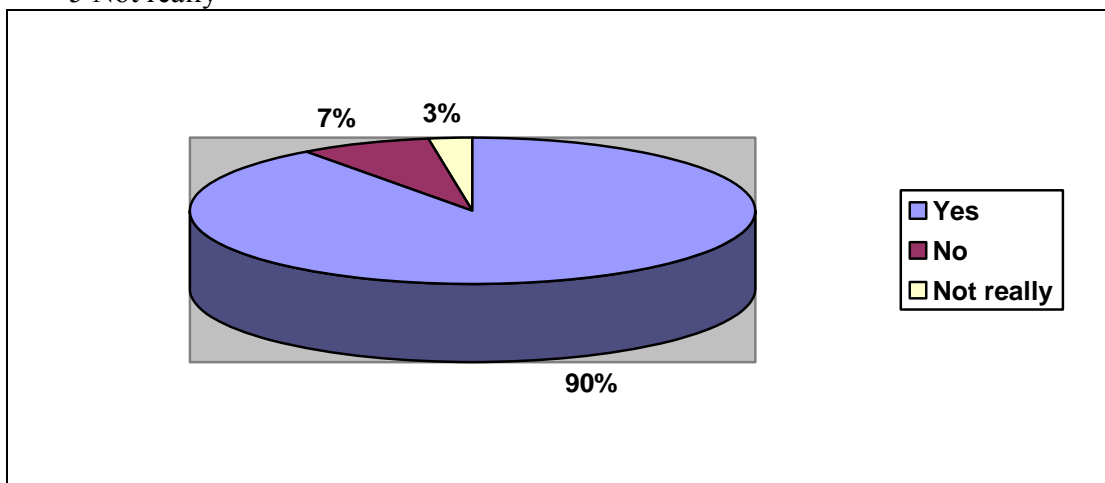
0-19 years	16 (8%)
20-29 years	36 (19%)
30-39 years	28 (15%)
40-49 years	22 (12%)
50-59 years	39 (21%)
60-69 years	27 (14%)
70-79 years	17 (9%)
over 70 years	5 (3%)

Regarding the history of the patient experience with the health system (number of hospitalizations), the data collected show that:

Percentage (number) of patients	Number of hospitalizations during their life
21% (40)	1 time
20% (38)	2 times
11% (21)	3 times
7% (14)	4 times
7% (14)	10-15 times
7% (13)	5 times
4% (7)	over 20 times
2% (4)	6 times
2% (3)	7 times
1% (2)	8 times
1% (1)	9 times

All those interviewed are registered on the list of a GP. We asked if they came to their GP for periodical check-ups:

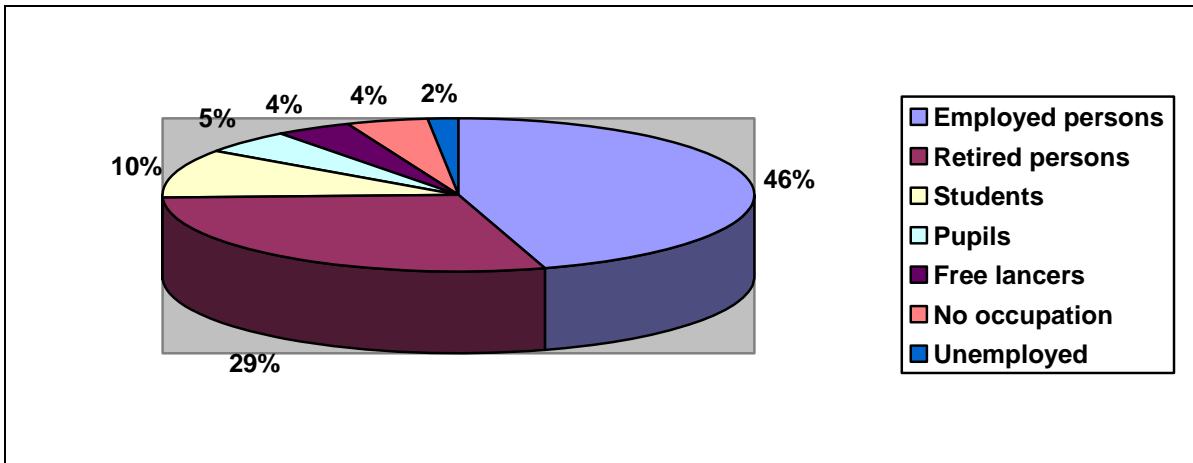
- 171 patients answered Yes
- 14 No
- 5 Not really



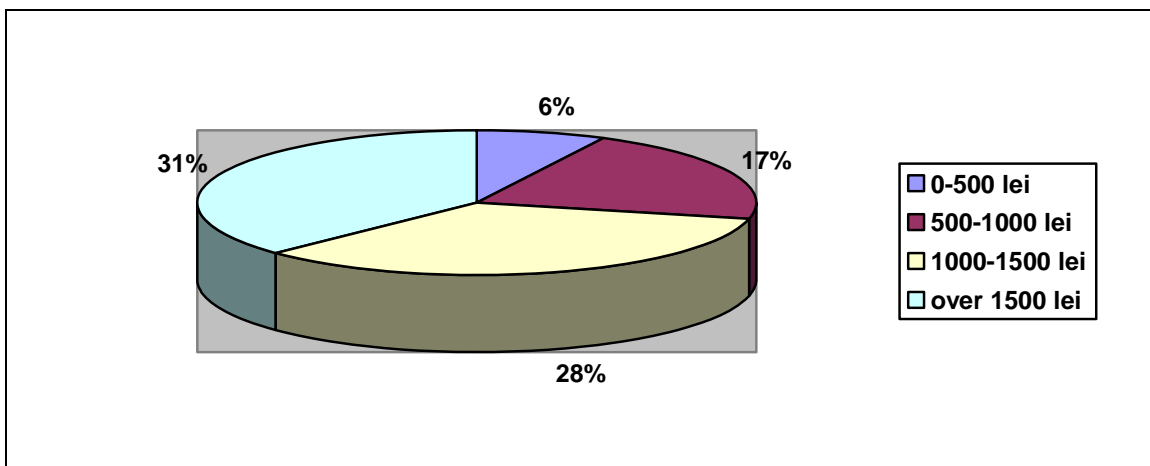
The data about level of education of the patients interviewed shows that:

31% (60)	High-school (12 classes)
29% (56)	Higher education
12% (22)	Secondary school (8 classes)
9% (17)	Vocational school
9% (17)	Primary school (4 classes)
8% (15)	Post-high-school
2% (3)	No education at all

Most of the interviewed patients were employed (46%) and retired persons (29%). The complete data are presented in the following chart:

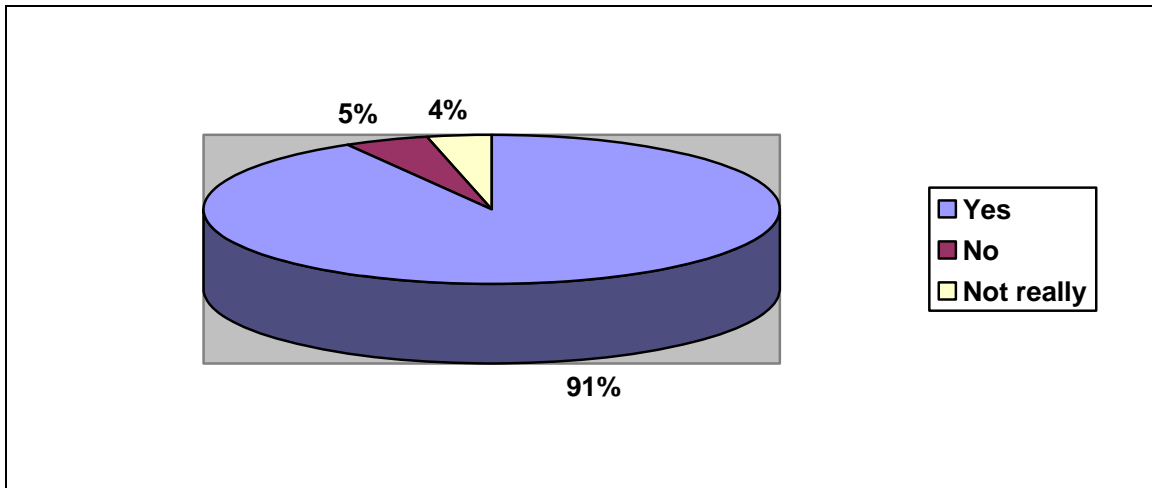


The results about level of income of the participants in this study show:

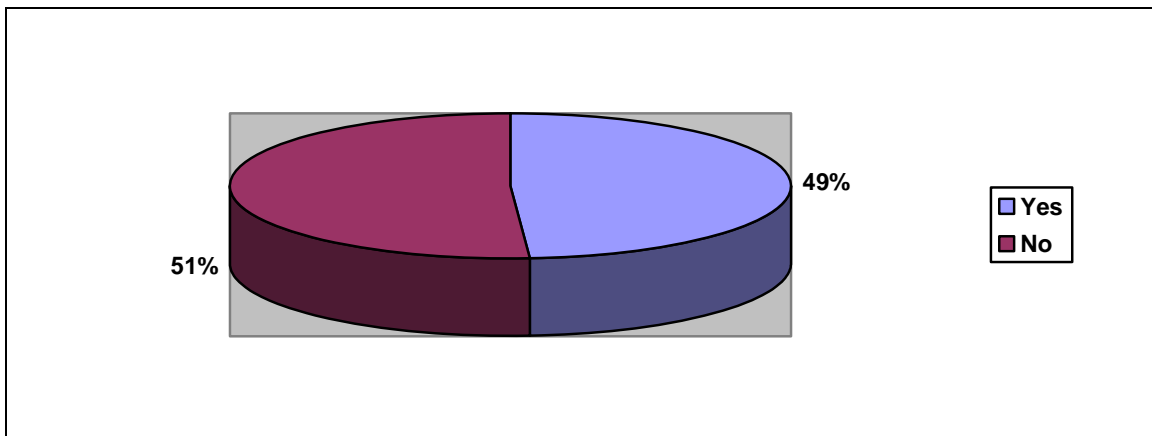


For comparison the gross minimum salary per economy in Romania is now of 600 lei per month (about 140 Euro).

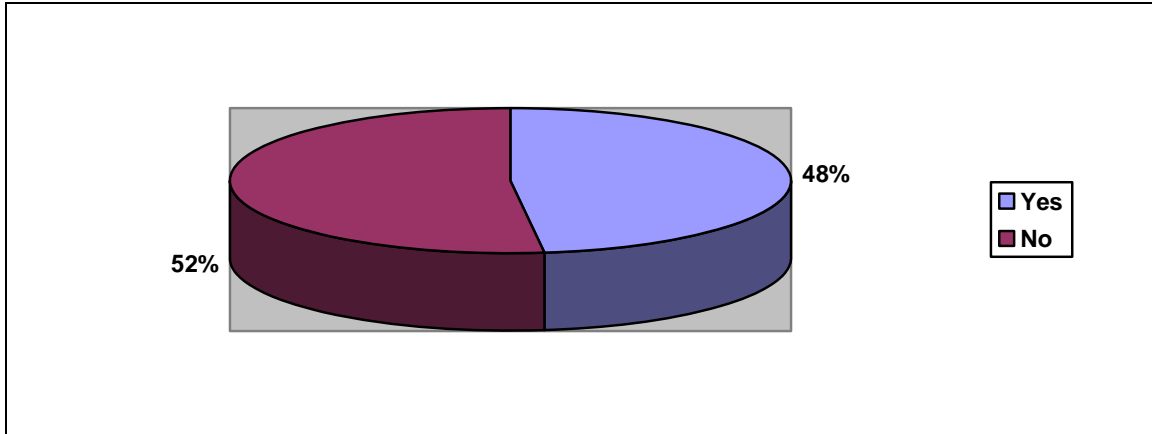
Asked if they easily find information when they need it, no matter the area of interest, 91% of the participants in this study answered yes, 5% gave a negative answer and 4% answered not really.



Asked if they know how to use a computer, the patients answered:



The results for the question about knowledge of how to access the Internet are almost similar:



54% of the participants in this study declared they have access to a computer connected to the Internet at home or at work and 46% gave a negative answer.

Asked to indicate the health information sources they use, the patients answered as follows:

95% (181)	GP or another doctor
63% (120)	newspapers, magazines
59% (113)	TV
55% (104)	family
47% (90)	Internet
38% (73)	friends
12% (23)	books
7% (14)	library

As it can be seen the library is on the last place.

However, asked about the health information source they prefer or the most comfortable way to get informed on a health topic, the answers were:

84% (159)	GP or another doctor
76% (144)	the doctor that treats them
36% (68)	Internet
28% (54)	family
18% (35)	TV
17% (33)	newspapers, magazines
9% (18)	books
8% (15)	friends
5% (9)	library

Again the library is in last place.

Asked about the information source they trust the most, the participants gave the following answers:

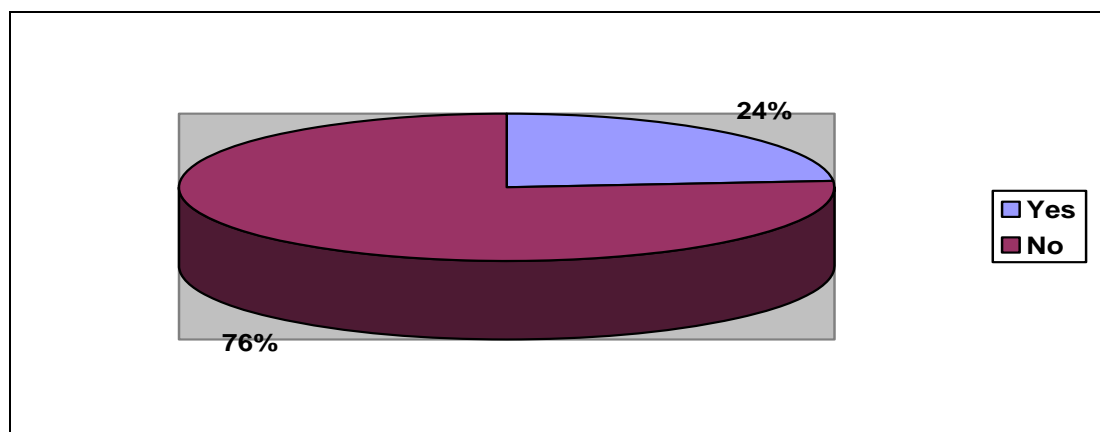
97% (185)	the doctor
14% (26)	family
9% (18)	Books, magazines, library
1% (1)	friends
1% (1)	Internet

What is noticeable here is the low level of trust in the information available on the Internet which perhaps shows a “healthy” level of education in the health field of the participants. Still it is surprising that 14% of patients trust the information they get from the family more than the information from books, magazines and libraries.

Asked which health topics they would currently like to get more information, most of the patients expressed their interest in treatment and diagnosis.

71% (134)	Treatment
27% (51)	Diagnosis
5% (9)	Side effects of the medication
5% (9)	Different investigations, analyses
4% (8)	Different diseases
3% (5)	Prevention
5% (10)	No reply

Asked if they have ever thought about getting the health information they need from the library, most of the patients (76%) gave a negative answer.



However, asked if they would consider the possibility of getting health information they need from the library, the patients answered:

- 57% (108) would prefer to make a phone call and get the information by phone;
- 38% (73) would prefer e-mail communication (send an information request by e-mail and get the answer by e-mail);
- 22% (41) would prefer to make a phone call, schedule a meeting at the library with the information specialist who could offer the information he needs;
- 16% (31) would prefer chat communication;
- 8% (15) didn't reply.

Asked what opinion they have about accessing health information resources for free on the Internet, (resources such as Sfatul Medicului (<http://sfatulmedicului.ro>) / Doctor's Advice)

- 28% (53) declared they don't access them;
- 19% (36) qualified them as useful;
- 9% (18) qualified them as interesting;
- 7% (14) said they are informative;
- 3% (5) said the information on these sites are insufficient;
- 2% (4) said the information was not trustworthy,
- 2% (3) said they access them;
- 42% (80) gave no answer to this question (most of these are from the participants that don't know to use the computer and access the Internet and don't have access to a computer connected to the Internet).

Asked about training in how to access these information resources and if they could have access to them through the library, 53% (101) of the participants said they would be interested in accessing them and 47% (89) gave a negative answer, rejecting totally such a possibility.

Asked about their present condition, 83% (157) declared they know what it is about, 15% (29) said not really and 2% (4) gave a negative answer.

84% (159) declared the information they got from their doctor is sufficient, 11 % (21) said not really, 4% said no and 2% (3) didn't answer.

50% (95) would like to get more information about their present condition, 18% (34) said no and 32% (61) answered they don't know.

Still, 48% (92) consider that getting more information about their present condition would help them, 16% (30) said no and 36% (68) said they don't know.

Most of them 96% (183) would like to get this information from their doctor, but 6% (11) don't exclude the possibility of getting them from their family and 12% (22) from the

Internet. This result contrasts strongly with the previous answers where it appeared that the participants did not prefer the Internet, did not consider it the easiest way to access information and distrusted most of the information they got from the Internet. 9% (18) indicated books, magazines and the library, again a very low percentage and 2% (4) didn't answer.

The pathology of the interviewed patients is extremely diverse and goes from acnea to leg amputation. In Appendix 3 is a complete list of the conditions with which the participants in this study presented.

A questionnaire which was distributed among the physicians that treated the patients that participated in this study revealed their opinion too about patients information, physician-patient dialogue and online health information sources like Medline Plus (<http://medlineplus.gov>), Patient UK (<http://www.patient.co.uk>) or Sfatul medicului (<http://sfatulmedicului.ro>).

The questionnaire which consisted of six questions (see Appendix 2) was completed by 14 physicians (9 surgeons, 2 specialists in anaesthesia and intensive care and 2 GPs).

Their answers show that most of them (8) agree with the idea of providing detailed information to patients about their diseases, considering this information necessary for patients. One of the doctors mentioned that this information should be provided in easily understandable language so that every patient understands what they are told. Two doctors declared that they considered this information necessary and the other two that it's very important that this information is offered to the patients. Two said that they already try to provide all the information they can.

Most doctors answering the questionnaire (12) considered it useful for patients to know as much as possible about their disease, two pointing out that in this way it is possible to have a better collaboration with the patients.

Asked if they explain exactly to their patients what is happening, what their disease implies, the procedure that they would undergo and if they offer advice to follow after they leave the hospital etc. (all these in order to encourage them to take informed decisions, to make informed choices about the therapeutic options etc.), 13 of 14 doctors answered positively, two specified they explain to those that don't understand just the strictly necessary information and one doctor said he explains to each patient according to their level of understanding.

Asked if they recommend to their patients other information sources too (sources that present their current disease or sources dedicated to patient education about health aspects in general), 7 answered positively and 6 gave a negative answer, one saying that only if the patient asked and another doctor declaring that eventually he recommended another doctor and two doctors even gave some examples of information sources which they recommend to the trained patients: pubmedia.ro, romedic.ro, lamedic.ro, Farmacia ta, Viata medicală, Infomedica.

The answers of the physicians about information sources like Medline Plus (<http://medlineplus.gov>), Patient UK (<http://www.patient.co.uk>) or Sfatul medicului (<http://sfatulmedicului.ro>) were as follows:

- only 3 doctors consider them very good;
- 3 consider them useful;
- 3 consider them useful, but are unsure of their trustworthiness;
- 1 has a relatively good opinion about them;
- 1 declared they are useful but the type of patient is also important;
- 1 said they are important for those that have access to the Internet;
- 2 declared they don't know them.

Asked directly if they consider useful such information sources:

- 6 answered yes;
- 3 said sometimes;
- 1 said not always;
- 1 said possibly;
- 1 said yes and no;
- 1 said they are useful for doctors;
- 1 said he doesn't know them.

Interpretation of the results

As the data collected indicates, most of the interviewed patients (60%) graduated from high-school and higher education and 56% are active persons in the sense that they are employed, they have a job (46%). Another 10% is represented by students.

Despite these figures and also the fact that a high percentage of them are between 20-49 years old (46%), a slight majority answered negatively about their ability to use a computer and to access the Internet (51%, and 52% respectively), with just 2-3% less giving positive answers. 54% declared they have access to a computer connected to the Internet.

All these data show that concerning the possibility of access to information, aspects such as their level of education, their income and the availability of electronic electronic equipment create the necessary framework for more than half of the participants in this study to be able to get information. And in fact, 91% declare they easily find information when they need it, no matter which is their area of interest.

Looking at health information sources that they currently use, the GP or another doctor was indicated by most of them (95%), followed by newspapers, magazines, TV, family etc. Almost the same answers were give when asked about the source they prefer. We must remark that the library as a possible health information source is in the last place surpassed by family and friends. If the Internet was indicated by 47%, respectively 36%

at the first two questions, when it is about trust, things drastically change with only one participant declaring he trusts the information found on the Internet.

It is very illustrative to mention some findings that resulted from the discussions we had with the patients and even their remarks when some questions were put during the interview. These explain in a certain measure the reticence of the participants towards the library as a place from where patients could get health information and help with the interpretation of the results.

Many said they didn't trust librarians. Their initial impression of the librarian is not a good one. So we can talk about image problems for librarians in Romania. Some remarked about the situation of libraries, especially those in the countryside, which are not automated and don't have access to the Internet. Some said that the librarians are not readily "available" to help and the fact that the librarians themselves don't really know how to find information. This is in contrast to the situation in the UK where librarians are seen as trusted intermediaries and where the Department of Health is piloting its NHS Choices project in public libraries so that all sections of the community can have access to the information provided.

76% of the participants have never thought about getting the health information they need from the library, but asked to think about this as a possibility, 57% said they would prefer to get the information by phone, followed by 38% preferring e-mail communication.

Despite the fact that for some of them those information resources which are available for free on the Internet seem useful and interesting, they don't really access them. One of the reasons indicated being the level of trust they have in such resources. Another reason would be that many of them don't know how to access and use such resources, despite the fact they declared that they knew to access information on the Internet, this being shown by 53% declaring that they would be interested in accessing resources if they were trained how to do it and if they could have access through the library.

A great majority of the interviewed patients declared (84%) that they are satisfied with the information they got from their doctor about their present disease, with only 11% answering not really and 4% no. To this we can add the observation that the physicians that completed the questionnaire said they tried to provide detailed information to their patients.

The physicians opinion about health information resources available on the Internet is that they are useful and some of them recommend them to their patients.

Most of the patients declare they go periodically to their GP, but we consider that this result doesn't show the reality in Romania, as we had interviews only with individuals that came to their GP and with individuals that were hospitalized because of their condition. Our opinion is that a lot of individuals registered on the list of a GP don't visit their doctor frequently. They go to the doctor only when they need a medical certificate of any kind for different purposes or the monthly prescription for their medication or

when they really feel ill and that is why many people are discovered with many different diseases in an advanced level of progression. The positive result may have been given because they come to their GP for medical documents and not for consultation. And some of the surgical patients interviewed also said very directly that in fact they go to their GP only for their monthly prescription for their medication.

We would also want to mention the fact that most of the patients hospitalized, the surgical patients, almost thanked us for talking to them, saying this helped them and made them feel a little better. Of interest is a discussion with a colleague, a neuropsychiatrist, from the Netherlands, during a conference two years ago (8). He stressed the importance of the dialogue with the patient, of the chance for hospitalized patients to discuss with a specialist, besides the one treating the disease, about their situation. It is noticeable that in Romania there are no psychiatrists especially employed for this type of discussion with patients.

Conclusions

The results of this small scale interview-based research among patients provides us with a good starting base for proceeding with phase two of our project for having better informed and more empowered patients in Romania.

Proposals for potential solutions for the improvement of the situation in Romania will be presented at the end of all phases of the research project. At this stage, preliminary steps would include, in our opinion, first an information literacy campaign of the population about the available health information sources that they can use and especially libraries as health information providers. Of course work needs to be done about the image of libraries and librarians which is currently poor.

Health information consumers should be trained at a basic level at least how to search, retrieve, evaluate, filter the information and if not, they must be taught to ask for professional assistance from an information specialist at the library premises. Also health information by phone or e-mail, as the results of our study show, is the preferred route for many patients and should be explored following the UK experience.

This means libraries should be prepared to work with users in search of patient orientated health information. This will represent another phase of our project which will include an analysis of the capacity of Romanian libraries and their level of preparedness for satisfying the needs of health information consumers.

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Appendix 1 – Patient questionnaire

Interview Questions

1. Hospital: _____ Clinic: _____
2. Date: _____
3. Sex: M F
4. Age: _____
5. This is your.....time when you stay in the hospital.
6. Are you registered to a GP? Yes No
7. Do you go periodically to your GP? (for analyses, for control/checking your health state etc.) Yes No
8. Level of education: High-school Higher education Another: _____
9. Job: _____
10. Level of incomes: till 5 million 5-10 millions over 10 million over 15 millions
11. Level of information literacy (do you find it easy to find information?) Yes No
12. Level of IT literacy (do you know to use a computer, to access the Internet? etc.)
Yes No Yes No
13. Do you have access to a computer connected to the Internet
Yes (at home, at work) No
14. When you want to find out medical information what do you do? (What do you do in order to get the information? To whom/what source do you appeal?
 - a. GP or another doctor
 - b. family
 - c.friends
 - d.books
 - e. newspapers, magazines
 - f. TV
 - g.Internet
 - h. library
 - i. others
15. What information channel would you prefer? From where/whom would you prefer to get the medical information you are interested in? How it would be more comfortable for you?
 - a.the doctor that treats you
 - b.the GP or another doctor
 - c.family
 - d.friends
 - e.books
 - f. newspapers, magazines
 - g. TV
 - h. Internet
 - i. library
 - j. others
16. What information channel would you trust more?
17. On what medical subject (theme) you would like to get more information? (diagnosis, treatment, side effects etc.)
18. Have you ever thought of appealing/going (that you could appeal to) to a library?
Yes No
19. What do you think about the possibility of appealing to a library?
 - a. you would prefer to make a phone call and get the information you are interested in
 - b.to make a phone call and then establish a meeting at the library with an information specialist who could offer you the information you are interested in
 - c.you would prefer e-mail communication: to send a question and get the answer this way
 - d.or chat communication

20. Which is your opinion about the possibility of accessing information resources offered for free on the Internet, for example Sfatul Medicului (<http://sfatulmedicului.ro>)?
.....

21. If you could have access to such a resource for example through the library, would you be interested in accessing it? Yes No

22. About your present disease:

- | | | | |
|---|-----|------------|--------------|
| a.do you know exactly what is all about, what it implies | Yes | Not really | No |
| b.the information you got from the doctor is enough | Yes | Not really | No |
| c.would you like to have/get more information | Yes | No | I don't know |
| d.do you think that getting more information/knowing more would be useful for you | Yes | No | I don't know |
| e.from where would you prefer to get this information? | | | |

Appendix 2 – Physician questionnaire

Questionnaire

Hospital:

Clinic:

Date:

1. Which is your opinion about giving detailed information to your patients (information about their diseases)? (Do you consider that the dialogue with patients should be encouraged as much as possible or not?)

2. Do you consider it would be useful for patients to know more about their disease? (the understanding in detail of the diagnosis, of the therapeutic options, of the side effects etc.)

3. Do you explain to them exactly what is all about, what their disease implies, the procedure that would be applied to them, do you offer them advice to follow after they leave the hospital etc. (all these in order to encourage them to take informed decisions, to make informed choices about the therapeutic options etc.)?

4. Do you recommend to your patients other information sources too? (sources that present their current disease or sources dedicated to patient education in what concerns health aspects in general) If yes, could you indicate some examples?

5. Which is your opinion about information sources like Medline Plus (<http://medlineplus.gov>), Patient UK (<http://www.patient.co.uk>) or Sfatul medicului (<http://sfatulmedicului.ro>) available for free on the Internet?

6. Do you consider useful such resources?

Appendix 3

The Pathology of the interviewed patients

Dental Abscess	Precordialgia
Narcotic Abuse	Periocular Eczema
Acne	Acute Enterocolitis
Prostate Adenoma	Eosinophilia
Balano-prepuce Adherences	Epilepsy
Allergic dermatitis	Epistaxis
Leg Amputation	Chronic Etylism
Analyses	Eventration
Anemia	Weight Excess
Hypochromic Anemia	Atrial Fibrillation
Bilateral Adenexitis	Uterine Fibroid
Herpangina	Annal Fisure
Angina Pectoris	Fracture
Appendicitis	Gastritis
Arteriopathy	Glaucoma
Myopic Astigmatism	Hyperthyroidian Goiter
Bronchial Asthma	Gout
Cerebrovascular Accident	Hemorrhoids
Chronic Blepharitis	Hepatitis B
Graves Disease	Hernia
Chronic Renal Disease	Hypercholesterolemia
Bronchitis	Hypermetropia
Renal Calculi	Adrenal Gland Hyperplasia
Vaginal Candidiasis	Hypertriglyceridemia
Ovary Cyst	Hypocalcemia
Chronic Ischemic Heart Disease	Weight Hypotrophy
Kyphosis	Arterial Hypertension Stage II
Hepatic Cirrhosis	Congestive Heart Failure
Acute Cystitis	Acute Myocardial Infarction
Cholecystectomy	Urinary Incontinence
Appendix Colic	Infection
Renal Colic	Cardiac Failure
Fermentation Colitis	Circulatory Failure
Conjunctivitis	Corticoadrenal Gland Failure
Seborheic Dermatitis	Hepatic Failure
Gestation Diabetes	Mitral Regurgitation
Diabetes Mellitus	Respiratory Failure
Lobar Discopathy	Mental Delay
Dislipidemia	Lumbar Sciatica
Ventricular Septal Defect	Leukemia
Cervical Pains	Leukocytosis
Pains at the amputation level	Regional Lipoma

Cholecystolithiasis
Nephrolithiasis
Metrorrhagia
Tegumentary Mycosis
Microadenoma
Myopia
Obesity Grade I
Osteoporosis
Earache
Polycystic Ovary
Parkinson's Disease
Pigmentation Spot
Pityriasis
Thumb wound
Basal Pleuritis
Polyarthrititis
Spinal Problems
Gastro-esophageal Reflux
Allergic Rhinitis
Rhinoadenoiditis
Rhinosinusitis
Pregnancy in Evolution
Thoraco-lumbar Scoliosis
Anxiety Syndrome

Peripheral Ischemia Syndrome
Depression Syndrome
Down's Syndrome
Vaginal Secretion
Sinusitis
Spasmophilia
Premenstrual Syndrome
Cervical Spondylitis
Lumbar Spondylitis
After-transplant Status
Sinus Tachycardia
Thalassemia
Pulmonary Tuberculosis
Head Injury
Hemorrhoidal Thrombosis
Neurotic Disorder
Sleep Disorder
Ear Tumor
Duodenal Ulcer
Fibroma Uterus
Varix
Inguinal Verruca
Respiratory Virosis
Vulvovaginitis