USER EXPERIENCES WITH A PILOT TEXT MESSAGING INTERVENTION AIMED TO SUPPORT PATIENTS WITH ACUTE CORONARY SYNDROME AFTER DISCHARGE

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BACKGROUND

Acute coronary syndrome (ACS) is a leading cause of hospital admission. Many patients with ACS experience challenges after hospital discharge. Text messaging (SMS) has the potential to reach these patients; however, there is limited knowledge about the effectiveness and acceptability of SMS programs during this period.

OBJECTIVE

To assess the acceptability of and users’ experiences with a pilot SMS intervention that aimed to support patients after discharge from a hospitalization for ACS.

METHODS

Seventy-six participants were recruited as inpatients and were randomized at discharge to receive usual care or a 60-day SMS program that included automated one-way messages with information on follow-up care, self-management and healthy living. Participants were asked two Likert scale questions about their satisfaction at follow-up. We also conducted semi-structured interviews with 18 participants who received the messages. Using thematic analysis, we identified themes regarding users’ experiences, engagement, and the program’s impact.

RESULTS

Participants liked the content, tone, message frequency, and program length. Many stated they looked forward to the messages and all but two interview participants reported reading every message. The two that did not said they may have missed a couple. Perceived impacts of the program included making participants feel as if their recovery process was normal, feeling as if they were receiving social support, and reinforcing that they were on the right track. However, some participants reported they did not benefit much and felt they did not change their behaviours. Ninety-five percent (n=17) of those interviewed would recommend the program to other cardiac patients.

"I was satisfied with the program" (n=32)

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"The program helped me manage my condition" (n=32)

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ENGAGEMENT

“I would go back to re-read the messages just to see the confirmation I’m on track, I’m not slipping”

“Most of them were really helpful, talking about how not to feel alone, and, you know, the texts like that, those were great. And you know, the ones for, you know, the parts that were a little more, like it is maybe normal to have a day where you feel unhappy or sad, and so you don’t feel completely alone and I think that’s a really important thing that that brought forward.”

“Perceived social support”

“And the other hand, it was, it was making me feel somebody else out there is thinking about me. And it was, emotionally, it was very great.”

Reinforcement

“It gives you that little bit of positive feedback that says, ‘Oh, I am doing that right, okay.’”

Overall Impact

“I really appreciated getting those. They were a good support for me because it’s private and personal. You don’t have to make an appointment, you know, all the support people that I have, I have to make appointments with them.”

“Most of them were really helpful, talking about how not to feel alone, and, you know, the texts like that, those were great. And you know, the ones for, make sure you eating properly, blah blah blah, you know, it makes me think. Not that I do it, but…”

CONCLUSION

The SMS program was well received and the design was acceptable to most participants; however, not all felt that it impacted their recovery or resulted in them changing their behaviours. Therefore, the intervention may need to be modified to successfully target behaviour change.

ACKNOWLEDGEMENTS

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