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Are Early Adopters Of A Web-Based Patient Portal More Activated Than Matched Controls?

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Background: Growing interest and research on the impact of web-based e-portal usage on patient self-efficacy raises questions on whether and how e-portal users differ from their peers who do not use e-portals. Our objective was to examine this question, comparing portal and non-portal users, specifically focusing on patients with a diagnosis of diabetes mellitus, cardiovascular disease, or chronic heart failure.

Methods: Random sample of 300 e-portal users and 129 matched control patients (i.e., matched on age, sex, chronic disease diagnosis, and clinic). Patient activation was assessed using the 13-item Patient Activation Measure (PAM), a new instrument designed to measure whether patients have the knowledge, skills, and confidence to self-manage their chronic condition. All participants had a primary care physician in one of the Geisinger Clinic's 41 community practice sites (all use an electronic health record).

Results: E-portal users were significantly more likely to be male, have more education, and report a higher annual income. The overall mean PAM score was 62, suggesting that this population of patients is already actively engaged in self-managing their conditions. After adjusting for potential confounders, e-portal users were more likely to have higher activation scores, but this association did not achieve statistical significance. When patients were classified according to their stage of activation, users were more likely to be classified as Stage 4. E-portal users were significantly more likely to report high levels of confidence in their ability to complete medical forms and reported higher levels of health-related internet use. Self-reported medication adherence was higher among e-portal users. There were no between-group differences in medical decision-making preferences or in levels of self-reported physical activity.

Conclusions: E-portal use is associated with male gender, higher education and income, and use of the internet for health related activities. This profile may reflect early-adopter status or simply characterize differences in access to technology, comfort with internet use, or other factors related to care preferences. E-portal users showed a trend toward greater patient activation. Findings from eHealth studies may have limited generalizability due to this "volunteer" effect and future studies should attempt to quantify these differences in meaningful ways.