

A video-based decision support tool may aid decision-making for Black individuals considering ICD implantation

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A randomized clinical trial of Black patients eligible for an implantable cardioverter-defibrillator (ICD) has found that the use of a video-based



decision support tool increased knowledge of but not assent to ICD implantation. The findings are published in *Annals of Internal Medicine*.

Current clinical guidelines recommend that with systolic heart failure receive ICDs for prevention of sudden cardiac arrest. However, Black patients are less likely to receive an ICD than white patients, despite a greater risk profile.

Researchers conducted a <u>randomized clinical trial</u> of 343 Black patients eligible for a primary prevention ICD. The authors assigned 114 patients to watch a video-decision tool featuring a Black clinician and patient; 114 patients to watch a video featuring a white clinician and patient; and 115 patients to receive usual care.

The authors found no difference in assent between individuals who watched a video or received usual care. They also found no difference in assent between persons who watched the racially concordant and discordant videos. However, use of the videos increased patient knowledge and decreased the time clinicians spent with study participants. The authors also highlight the 40% refusal rate for ICD implantation, noting that aversion to cardiac procedures in Black communities is prevalent and complex in its underpinnings, and it represents additional opportunities for research that examines the influences on medical decision making incorporating markers of social determinants of health.

More information: Facilitating Shared Decision Making Among Black Patients at Risk for Sudden Cardiac Arrest, *Annals of Internal Medicine* (2023). DOI: 10.7326/M22-2934

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