Objectives

- To assess knowledge and priorities of patient towards SWL.
- To evaluate the effect of implementing health education protocol on patients' knowledge and priorities towards SWL.

Methods

- 245 patients included: group I (123 patients) → no SWL before, group II (122 patients) → previous experience of SWL.
- All patients were exposed to a health education protocol composed of information booklet and verbal education about SWL.
- Knowledge assessment and priorities questionnaires about SWL were introduced to the patients before and after application of health education protocol.
- We developed the first Arabic knowledge assessment questionnaire for SWL [Assiut University SWL knowledge Assessment questionnaire (AUSKAQ)] composed of 15 questions with maximal score 45.
- Priorities questionnaire contained 15 aspects of SWL. Each aspect was rated on a numerical scale from 1 to 10 according to its importance for the patient.
- Results of both questionnaires before and after the health education protocol were compared.

Results

- Mean age → 35.2±18 years [group I 33.64±18.42, group II 36.85±17.47 (p= 0.163, t test)].
- 167 ♂ and 78 ♀ [group I 86 ♂ and 37 ♀, group II 81 ♂ and 41 ♀ (p= 0.554, chi square)].
- Regarding knowledge assessment, mean score of all patients was 3.43 and 44.6 before and after health education respectively (< 0.001, paired t test).
- Before health education, it was 1.85 and 5.02 for group I and group II respectively (< 0.001, t test).
- After health education, it was 44.59 and 44.64 for group I and group II respectively (p= 0.709, t test).
- Regarding patient's priorities, the most important aspect was stone clearance followed by procedure explanation, early return to normality and discussion of progress.
- After health education, statistically significant increase in importance occurred for 9 aspects.
- The most significant increase was noticed in the importance of information leaflet which progressed from the 8th to the 6th rank.
- Statistically significant decrease occurred in one aspect which was the need for sedation during SWL.

Conclusions

- Both first time patients and patients with previous experience need to improve their knowledge about SWL.
- Stone clearance is the first priority for patients.
- Health education protocol improves patient's knowledge and clarifies their priorities towards SWL.
- Knowledge assessment questionnaire adds improvement to health service for Arabic countries.