AB038. Assessing the quality of online information for patients with carotid disease—a 5-year follow up

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Background: The availability of medical information has increased in recent decades. This does not necessarily equate with readable information. The aim of this study is to assess the readability of online available information, 5 years on from the first study of its kind.

Methods: Google Search engine was searched for “carotid endarterectomy” (CEA) and “carotid stenting” (CAS). The first 50 webpages returned were assessed. The Gunning Fox Index (GFI) and Flesch Reading Ease Score (FRES) were calculated.

Results: More webpages for CEA were peer reviewed 5 years on (15 vs. 10), while there were the same amount of web pages published by healthcare (n=17; 34%). CAS showed a decline in peer reviewed webpages (17 vs. 20), however there was an increase in healthcare published web pages (12 vs. 8). The FRES for CEA (mean 40) and CAS (mean 34.8) were similar (P=0.19) and showed no readability improvement from the 2014 figures (CEA mean 42.8 and CAS mean 36.1). The GFI for CEA (mean 11.8) and CAS (mean 12.1) again were similar (P=0.7) but 5 years ago the GFI scores were higher (CEA mean 14.8 and CAS mean 16.3), which indicates a slight improvement in readability.

Conclusions: The updated readability score between CEA and CAS website was equivocal. However since 2014, the GFI has reduced, inferring that web based information is more readable. The FRES has remained relatively static. Both scores indicated that the webpages were difficult to read and may not be accessible to all people, even with more healthcare published webpages.

Keywords: Readability; carotid; endarterectomy; carotid artery stenting


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