Group Education on Continuous Positive Airway Pressure Adherence: Could it Be More Efficient as well as More Effective?

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Lettieri et al. should be congratulated for their study on the impact of group education on continuous positive airway pressure adherence.¹ At the end of the study, the authors rightly consider what factors may have made the group sessions more effective than the individual sessions. However they overlook perhaps the most important difference between the two types of session. The time that patients spent in the individual sessions was 45 minutes, but the time spent in the group sessions was 120 to 150 minutes. When examined from this perspective, it is perhaps unsurprising that patients in the group sessions had better outcomes than those in the individual sessions: the intervention that they received was three times the size of the standard intervention.

There is another element to the study that the authors could have made more of. They mention costs occasionally but only in a tangential way—they do not delve deeply into the costs of the two interventions. The authors suggest that the group sessions may be more cost efficient as well as more effective, but currently there is no proof that this is the case, and many educational initiatives that appear at face value to be more cost efficient turn out not to be.²

To prove the case definitively one way or the other, the components of both interventions need to be accounted for—these will include faculty, facilities, equipment, and consumables. These components will need to be costed and the costs added up. Once the costs of both interventions are known, the stage will

be set for a cost effectiveness analysis—ideally done as a randomized controlled trial. This may seem like a sizeable amount of work but the outcomes could be rewarding—an intervention that is both more effective and cost effective than alternatives.

CITATION

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DISCLOSURE STATEMENT

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