Development and evaluation of an audio-visual tool for therapeutic education in phenylketonuria (PKU)

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Development and evaluation of an audio-visual (AV) tool for Therapeutic Education (TE) in phenylketonuria (PKU) - Ben Chehida et al - Tunisa

BACKGROUND
Lack of specialized caregivers represents a barrier for optimal therapeutic education (TE) to obtain good adherence to the diet and optimal metabolic profile in PKU patients.

AIM
To develop and evaluate an audio-visual (AV) Tool for TE in PKU patients in a low-income country.

METHODS
The video: 13 mini-sequences answering the most frequently asked questions.
The text: written in dialectal Arabic.
The scientific concepts: simplified and explained with illustrations and codes.
Animation: Power Point software.
Sound edition: Adobe Premiere software.
A cross-sectional evaluation: 35 participants (36% are parents of patients); Google forms questionnaires sent by email in July 2020.
Development and evaluation of an audio-visual (AV) tool for Therapeutic Education (TE) in phenylketonuria (PKU)-

RESULTS

Overall view of the Video

To visualize the video (in arabic langage) : [click here]

The disease
- 3 questions
- 11 sequences
- 2 min

Management
- 9 questions
- 21 sequences
- 5 min

Follow-up
- 6 questions
- 11 sequences
- 2.5 min

Pregnancy, Social life, Prevention
- 4 questions
- 8 sequences
- 2.5 min

The video (12 min)

Symptoms
- Newborn screening not available

Phenylalanine

Brain intoxication
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RESULTS

Management and follow up

Classification of Foods

Forbidden

To Weigh

Allowed

Exchanges

Phe Free Formula

Blood dry spot (DBS) sampling, handling, results / adjustments
Development and evaluation of an audio-visual (AV) tool for Therapeutic Education (TE) in phenylketonuria (PKU).

RESULTS

Pregnancy, Social life, Prevention

Targeted (new born) screening in the family

Before and during Pregnancy

Booklet of low protein, low cost recipes

Evaluation

▪ **Form:** often (very) satisfactory for all items (>80%), except for the sound (58%).
▪ **Content:** predominantly (> 60%) convenient.

CONCLUSION

Easy dissemination and large **accessibility** of this AV tool, adapted to the Tunisian context, should **facilitate the TE** by all caregivers. However, it **should not replace** face-to-face education.