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## EDITORIAL COMMENT



The authors have provided a unique perspective on the management vesicoureteral reflux (VUR) that incorporates parental preferences regarding various aspects of treatment options. They utilized an innovative, crowd-sourced approach to recruit a

national sample of parents online who presumably did not have any “real-world” experience with VUR. Many readers may question whether the wisdom of crowds should supplant the experience of those who have actually dealt with a given scenario in their own children. Previous studies in political science, economics, and psychology, however, have confirmed the external and internal validity of a similar approach to subject recruitment.<sup>1–3</sup> In addition, the description of a “preference model” in the current study is a precursor to the development of a decision aid for parents of children with VUR. The authors have presented a type of “values clarification exercise” that the International Patient Decision Aids Collaboration considers a key component of patient decision aids.<sup>4</sup> Decision aids are tools designed to help people make informed, values-based choices about their healthcare options in partnership with their providers.<sup>5</sup> Shared decision-making represents the state of the art in counseling patients faced with difficult or uncertain medical decisions and its implementation has been widely encouraged by The American Urologic Association.<sup>6</sup> The current study is an important contribution to the pediatric urologic literature because it will have future implications for the dissemination of shared decision-making and the development of decision aids in our field.

**Katherine H. Chan**, Department of Urology, Indiana University School of Medicine, Indianapolis, IN; Department of Pediatrics, Center for Pediatric and Adolescent Comparative Effectiveness Research, Indiana University School of Medicine, Indianapolis, IN

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