EBM in patients with chronic disease

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I do **not** have financial relationships or other potential conflicts related to the content of this presentation.
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Diabetes
Hypertension
High cholesterol
Depression
Bad back
Neuropathy
Obese
A1c 8.2%
LDL high
HCTZ
Beta-blocker
Metformin
Glipizide
Neuropathy
108 kg
Pain
Endocrinologist
Podiatrist
Dietitian
Dizzy
Take pills
Exercise
Depression
Check sugars
Avoid salt, fats, carbs
Take off work
Check his feet
Get a ride
Obese
Exercise
Bad back
Podiatrist

3 2 1
Numbers don’t add up
Deadline is now
take work home
perform!

Wasted!
Daughter back at home
2 beautiful girls

Deadline is now
take work home
perform!

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Guidelines

**Intensify treatment** to achieve HbA1c that is appropriate for the patient:
- Use combination of oral agents
- Use self-monitoring
- Use insulin if combinations not effective
- Use intensive insulin therapy
Comorbidities

Treatment goals
LDL goal

Glucose goal
BP goal

Health care visit frequency
BG monitoring

Aspirin

Treatment burden

Wyatt KD et al. Med Care. 2014;52 Suppl 3:S92-S100
Multimorbidity

Obese  High cholesterol  LDL high  A1c 8.2%
Diabetes  Hypertension  Dizzy
Depression  Bad back  Neuropathy  Can’t sleep  Pain
Multimorbidity

Obese
High cholesterol
Diabetes
Hypertension

55

Depression
Pain
Dizzy
Can’t sleep
Do the other conditions and their management impact…

Baseline risk

Responsiveness

Vulnerability

Neuropathy

Antihypertensive

Anticonvulsant

Diabetes

HTN

Hyperlipidemia

Antidepressant + antihyperglycemic
Socio-personal context

Treatment goals
- LDL goal
- Glucose goal
- BP goal
- BG monitoring
- Health care visit frequency
- Aspirin

Treatment burden

Wyatt KD et al. Med Care. 2014;52 Suppl 3:S92-S100
Evidence-based guidelines
Quality measures
Specialist care are disease-specific

Increasingly complex regimens
Treatments | Monitoring

Poor care coordination
Shift to self-management

Increasing treatment burden
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Exercise
Podiatr
The work of being a chronic patient

Sense-making work

Organizing work and enrolling others

Doing the work

Reflection, monitoring, appraisal
The work of being a chronic patient

People with more chronic conditions attend more visits, get more tests, and more medicines

2 hours/day spent on health-related activities

Of 83 workload discussions in 46 primary care visits (24 min): 70% left unaddressed
Life

Workload

Capacity

Scarcity

Burden of treatment

access
use
self-care

Burden of illness

Outcomes

Disease-specific guidelines, specialists, and quality targets
Multiple treatments | Monitoring tests
Limited care prioritization
Poor care coordination

Shippee N et al JCE 2012
Exploring imbalance

1. Is there imbalance of workload-to-capacity? Has the clinical disrupted life, or *vice versa*
2. Was this acute or chronic imbalance?
3. Was this caused by increased workload? From life work? From patient work?
4. Was this caused by reduced capacity? Which: personal, functional, socio-economical?
Workload-to-capacity imbalance?
Acute or chronic imbalance?
By increased workload or reduced capacity?
How to manage?

Assess burden of treatment and illness

Align **workload** with patient goals:
- Shared decision making
- Medication therapy management (deprescribing)
- Capacity coaching
How to manage?

Assess burden of treatment and illness

Align workload with patient goals:
- Shared decision making
- Medication therapy management (deprescribing)
- Capacity coaching

Assist patient capacity:
- Self management training
- Palliative care
- Mental health
- Physical / occupational therapy
- Financial resources
- Community and governmental resources
Management of Imbalance

A. Reduce waste for the patient / caregiver
   In accessing + using healthcare/other services
   In enacting self-care

B. Team-based care
   Train primary care team in imbalance management

C. Policy review
   Guidelines/quality measures to incorporate context
Minimally disruptive healthcare

Evidence based healthcare designed to reduce the burden of treatment on patients while pursuing patient goals.

May CR, Montori VM, Mair FS. BMJ 2009; 339:b2803
More about shared decision making:
http://shareddecisions.mayoclinic.org

More about MDM:
http://minimallydisruptivemedicine.org

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