

Discussion Group 5

Bridging the gap between knowledge and
parctice in management of chronic MM patients

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Background

European Health care systems are facing the challenge of caring for complex patients characterized by the presence of co-occurring, multiple chronic diseases, and a condition known as multimorbidity. Multimorbidity has a relevant impact on patients' outcomes and health care costs in both younger and older adults.

Question 1

What are the main obstacles found in the translation of knowledge into the clinical practice in management of multimorbid conditions?

1. Limited evidence to support translation
2. Proof of cost effectiveness and improvement in outcomes
3. Regional or local organization difficult to change (established work flows difficult to change)
4. Local or regional awareness of a need of a change
5. Share and dissemination of knowledge at the local level → bottom-up change

Question 2

What resources do we have to help close the gap?

1. Early involvement of relevant institutions (patients, physicians, pharmacists, nurses, health insurances, policy makers)
2. Empowerment of patients and patients organizations
3. Identification of key elements that can be transferred to different practices
4. Dissemination at local level to raise the need

Next steps

Produce evidence to support the change

Disseminate results

Create a minimum set of characteristics of good practices that can be applicable in different settings

Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-Chrodis)*



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