Workpackage 6
Development of common guidance and methodologies for care pathways for multi-morbid-patients

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Tasks

T1. **Identify targets** of potential interventions for management of multi-morbid patients (M 1-12)

T2. **Review existing care (pathway) approaches** for multi-morbid patients (M 1-12)

T3. **Assess and select good practices** on management of multi-morbid patients (M 13-24)

T4. **Define** multi-morbidity case management **training programmes** (M 25-36)
Tasks

T1. Identify targets of potential interventions for management of multi-morbid patients (M 1-12)

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T4. Define multi-morbidity case management training programmes (M 25-36)
Task 1 (leader AIFA)

• **Analysis of existing databases**
  • Databases identified **(Task 1.1)**
  • Strategies for data analysis defined **(Task 1.2)**
  • Research questions defined **(Task 1.2)**
  • Analyses performed **(Tasks 1.3)**
  • 7 papers + 1 Editorial produced (monographic issue EJIM) **(Task 1.4)**
**Task 1 (leader AIFA)**

<table>
<thead>
<tr>
<th>Author</th>
<th>Title</th>
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<tbody>
<tr>
<td>Onder G</td>
<td>Time to Face the Challenge of Multimorbidity. A European perspective from the Joint Action on Chronic Diseases and Promoting Healthy Ageing across the Life Cycle (JA-CHRODIS).</td>
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<tr>
<td>Hopman P</td>
<td>Health care utilization of patients with multiple chronic diseases in The Netherlands: differences and underlying factors</td>
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<tr>
<td>Navickas R</td>
<td>Multimorbidity - is this a special condition, or just another chronic disease? National multimorbidity overview based on Lithuania's national database</td>
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<tr>
<td>Alonso-Moran E</td>
<td>Health-related quality of life and multimorbidity in community-dwelling telecare-assisted elders in the Basque Country</td>
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<tr>
<td>Forjaz J</td>
<td>Chronic conditions, disability and quality of life and in older adults with multimorbidity in Spain</td>
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<tr>
<td>Alonso-Moran E</td>
<td>Multimorbidity in people with type 2 diabetes in the Basque Country (Spain): prevalence, comorbidity clusters and comparison with other chronic patients</td>
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<tr>
<td>Wikstrom K</td>
<td>Risk Factors, Hospitalization, And Mortality Related To Multimorbidity 10-year follow-up of Finnish population-based cohorts 1982-2012</td>
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<tr>
<td>Calderon A</td>
<td>Global health care use by patients with type 2 diabetes: does the type of comorbidity matter?</td>
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Task 1 (leader AIFA)

- Analysis of existing databases
  - Databases identified (Task 1.1)
  - Strategies for data analysis defined (Task 1.2)
  - Research questions defined (Task 1.2)
  - Analyses ongoing (Tasks 1.3)
  - Papers will be produced (monographic issue EJIM) (Task 1.4)

- Literature review
  - Search strategy defined (Task 1.5)
  - Review performed and paper produced (Tasks 1.6 and 1.7)
Task 1 (leader AIFA)

Patients with multimorbidity at high risk (target for intervention):

- Disease patterns
  - Individual diseases
  - Combination of diseases
- Low socioeconomical status
  - Low income
  - Poor social support
- Poor physical function
- Mental health problems
  - Depression
  - Cognitive impairment

Need of comprehensive assessment and intervention
Task 2 (leader NIVEL)

- Literature review
  - Review completed (Task 2.1)
Comprehensive care programs for patients with multiple chronic conditions and/or frailty: A systematic literature review (update)

20 publications/studies were selected evaluating 19 comprehensive care programs for multimorbid patients. Programs varied in the target patient groups, implementation settings, number of included interventions, and number of chronic care model components to which these interventions related. Strong evidence was found for a beneficial effect on physical and mental health status. Insufficient evidence or no evidence was found for improvement on other outcomes. Different components of the intervention were identified: health system, community resources, self-management support, delivery system design; decision support, clinical information system.
Task 2 (leader NIVEL)

- Literature review
  - Review completed (Task 2.1)
- ICARE4EU
  - Data collected and summary produced (Tasks 2.2 and 2.3)

<table>
<thead>
<tr>
<th>Programmes (N=97)</th>
<th>%</th>
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<tbody>
<tr>
<td>Multimorbidity in general</td>
<td>59</td>
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<tr>
<td>Specific diagnosis* with a variety of co-morbidities</td>
<td>27</td>
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<tr>
<td>A combination of specific diagnoses</td>
<td>14</td>
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* mainly diabetes, ischemic heart disease, heart failure, renal disease, hypertension, asthma, COPD, depression
1. Many recent initiatives/care programmes in Europe targeting patients with multi-morbidity and/or frailty.

2. Different key components can be identified, but programmes are extremely heterogeneous.

3. Programmes aim to increase cooperation, improve coordination of care and reduce use of care services.

4. Positive outcomes are often reported or perceived, but not much strong evidence based on scientific literature.

5. Strong evidence that CC programmes can improve (frail) patients’ physical and mental health status.
* This presentation arises from the Joint Action addressing chronic diseases and healthy ageing across the life cycle (JA-CHRODIS), which has received funding from the European Union, under the framework of the Health Programme (2008-2013).