

# **Why Self-Management? Has the Time Come?**

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# When One Has a Chronic Condition One Can Not...



**Not Manage**

**How One Manages  
Makes All the  
Difference  
to Both Quality of  
Life and Costs**



# We Usually Think in Terms of a Single Disease



**People 60 and above have 2.2 chronic diseases**

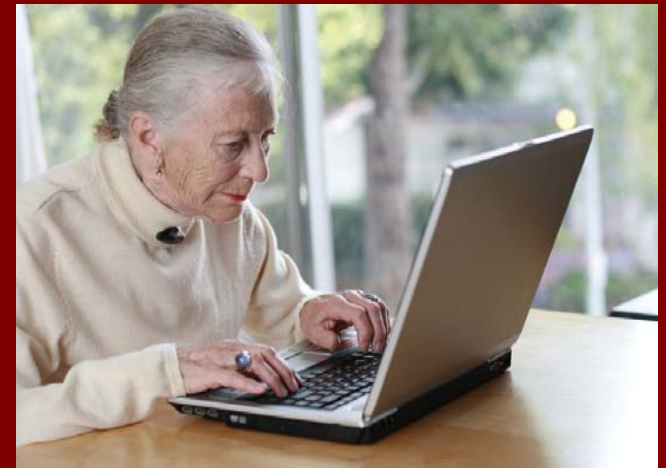
# We Usually Think in Terms of a Single Program

People Learn in Different ways

1. Some like to go to groups



# We Usually Think in Terms of a Single Program



# Stanford Chronic Disease Self-management Programs

- **Designed for co-morbid conditions**
- **Focused on managing life in the face of chronic conditions**
- **In multiple languages**
- **Delivered in 3 Modes**
- **Peer led**
- **Low cost**
- **Used by 1,000 or more organizations**



# What Do We Know from Stanford Studies?

- Improves quality of life
- Reduces health care utilization



# Small Group Chronic Disease Self-Management Program - Randomized Trial

## Demographic Data

- Age 62 years
- Male 27%
- Education 14 years
- No. Diseases 2.2



# Percent with Common Diseases

- Lung disease 21%
- Heart disease 24%
- Diabetes 26%
- Arthritis 42%

# Chronic Disease Self- Management

## *6-Month Improvements in Health Outcomes*

- **Self-Rated Health**
- **Disability**
- **Social and Role Activities Limitations**
- **Energy/Fatigue**
- **Distress with Health State**

All  $p < .05$

# Chronic Disease Self- Management

## *Improvements in Utilization and Costs*

- Average .8 fewer days in hospital in the past six months ( $p=.02$ )
- Trend toward fewer outpatient and ER visits ( $p=.14$ )
- Estimated cost of intervention \$300

# CDC Meta-Analysis

- **CDC commissioned 2 meta-analyses of the Stanford Programs (Chronic Disease and Arthritis)**
- **50 studies, conducted in English speaking countries (US, Canada, England, Australia)**

# **CDC Meta-Analysis Findings**

**Participants reported significant improvements in health behaviors and health status, for up to 10 months after the intervention ended**

A report will be released in early 2010

**CDC/NCOA Study  
Summary of 13 CDSMP Studies  
conducted by different investigators**

**“CDSMP results in significant,  
measurable improvements in  
patient outcomes and quality of  
life.”**



# CDC/NCOA Study

## Summary of 13 CDSMP Studies

**“CDSMP saves enough through reductions in health care expenditures to pay for itself within the first year”**



# Self-Efficacy

- **Skill Mastery**
- **Modeling**
- **Reinterpretation of Symptoms**
- **Social Persuasion**

## Participatory Teaching Techniques

- **Action planning**
- **Problem solving**
- **Decision making**
- **Short lectures**
- **Self-tailored**
- **Group activities**
- **Brainstorming**

# Problem



## Under the Present System:

- **There are few incentives to assist patient self-management.**
- **Payers seldom support self-management activities.**

# Solutions



- A part of normal chronic disease care



- Financed or reimbursed

# Solutions



- Offered both inside and outside of traditional health care settings
- Offered in multiple modes

# A participant Voice

*“I never even realized myself how alone I was and how I missed contact with people who understood what I was going through. I learned so much about how to help myself both physically and mentally... sharing thoughts, experiences and emotions has been wonderful”*