

DISMEVAL - Developing and validating Disease Management Evaluation methods for European health care systems

SUMMARY

One of the greatest challenges facing health systems in the 21st century is the rising burden of chronic disease. Chronic diseases place a substantial burden on individuals, their carers and society as a whole, with the economic burden considered to be sizeable. Chronic conditions frequently go untreated or are poorly controlled until more serious and acute complications arise. Even when chronic conditions are recognized, there is often a large gap between evidence-based treatment guidelines and current practice. Unlike acute health conditions, chronic ill health such as chronic pain are less responsive to treatment and intervention so care for chronic conditions is a case of finding ways of *managing* the chronic problem rather than curing it. Structured disease management has been proposed as a means to improve the quality of care provided to patients with chronic health problems and to improve health outcomes, as well as ultimately aiming to reduce healthcare costs through reducing healthcare utilisation.

Structured approaches to disease management provide an intuitively appealing way to improve the quality of care and so health outcomes. Yet, the available evidence on the ability of such approaches to actually do so remains uncertain and decision makers are demanding objective assessments of the impact of a given approach or programme.

Most of the existing evidence about disease management is derived from small, provider-driven DM programmes for high-risk patients, which have been designed and implemented in academic settings. There is very little evidence for the effect of large, population-based programmes such as those currently implemented in, for example Germany and Austria. Part of the problem is that there are no universally accepted evaluation methods to measure and report programme performance in a scientifically sound fashion that is also practicable for routine operations in different contexts.

This project brings together a multi-disciplinary team spanning a variety of key disciplines including evaluation science, chronic care, disease management design and operations, epidemiology, economics, and health policy, and covering most of Europe. Importantly, this team builds on established, successful, collaborative relationships. The project will work at two levels: (1) overview the approaches to chronic care and DM evaluation methods across Europe; and (2) test and validate possible evaluation approaches using currently existing programmes. The overviews will give specific attention to options for DM evaluation approaches, both experimental and non-/quasi-experimental, identifying best practices to test and validate with results used to inform and develop recommendation for policymakers and researchers. Integrating a range of complementary medium- to long-term activities, this includes a major element of policy engagement and active dissemination practices.