

Letters

Chronic disease self-management education programs: challenges ahead

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TO THE EDITOR: The article by Jordan and Osborne¹ highlights some of the key issues to be addressed if chronic disease self-management programs are going to be effectively incorporated into the Australian health care system, particularly in primary care.

Although the National Chronic Disease Strategy² recommends that self-management programs be integrated and supported at all entry points into the health care system, many of the self-management strategies and programs have been developed with little engagement of general practitioners and have not been integral components of primary health care. Jordan and Osborne highlight that, without the support of GPs, programs such as the Expert Patients Programme³ may have limited success.

We recently completed a systematic review for the Australian Primary Health Care Research Institute to explore the evidence for managing chronic disease in primary care, with specific reference to the Australian health care system.⁴ The self-management programs found to be most effective were those that developed self-efficacy in relation to specific behaviours, such as diet and exercise for diabetes, rather than those that were more general. The combination of self-management support with delivery system design changes (such as multidisciplinary team care and follow-up) was effective in improving patient health outcomes for a number of chronic diseases. This highlights an important and developing role for practice nurses in chronic disease management. Given the burden of chronic disease in Indigenous populations, it is important to conduct more research on the role of self-management education and support in Indigenous communities, as there were few relevant studies identified in our systematic review.

The funding available through the Australian Better Health Initiative⁵ will enable primary health care professionals, such as GPs and practice nurses, to receive self-management education training. Furthermore, to ensure that self-management support is embedded in primary care, we suggest that self-management support be included in care plans or annual cycles of care for conditions such as diabetes. Self-management support could also be incorporated into allied health services that are provided as part of a care plan.

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