

Evaluating Electronic Therapeutic Protocols (ETPS) for Diabetes and Heart Failure in Greece: Results from a Quantitative Survey Amongst Practicing Physicians

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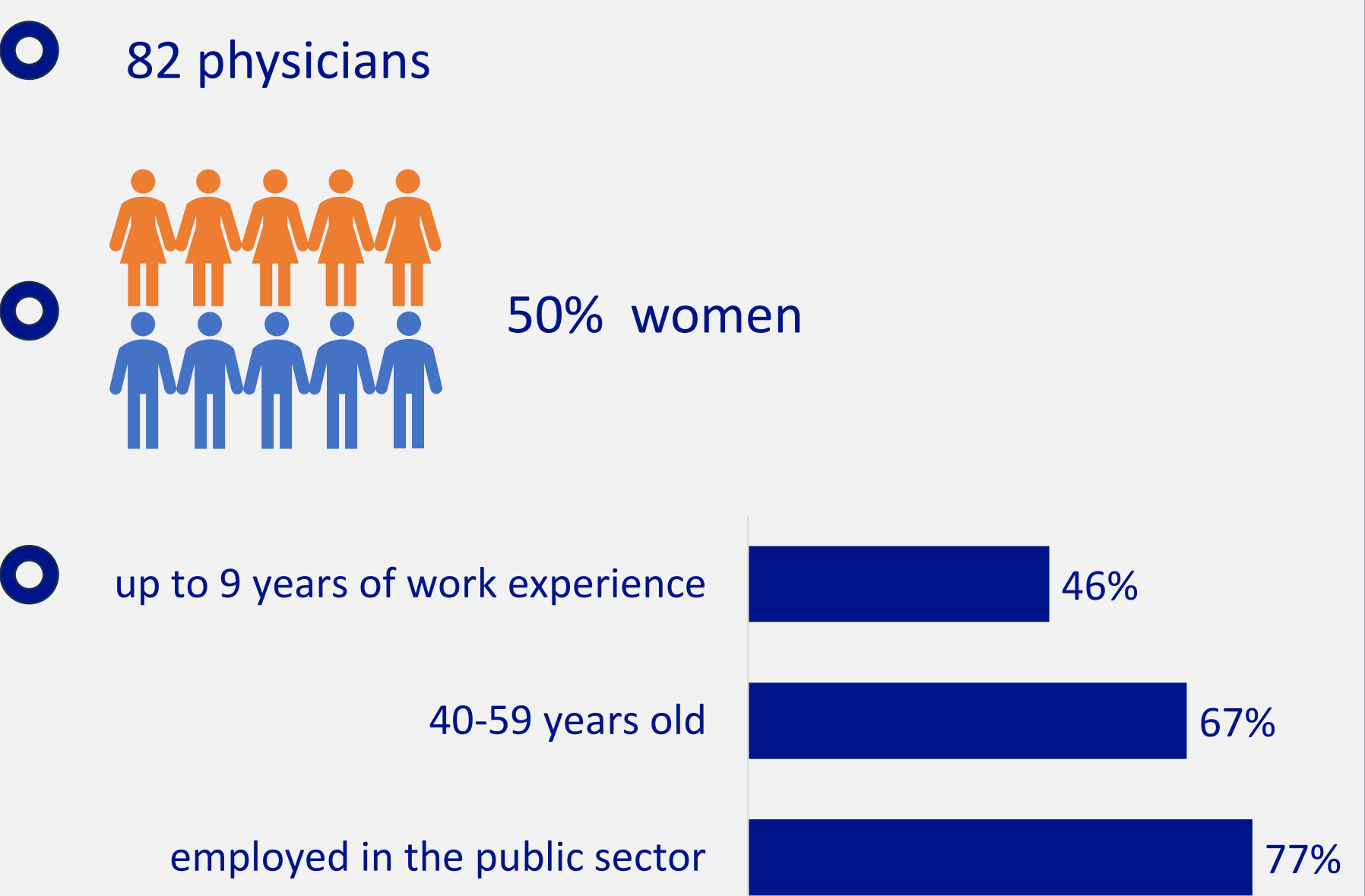
Introduction

Treatment protocols can enhance successful disease control and improved treatment outcomes whilst minimizing resource wastage; facilitating team-based care; and reducing both unwarranted clinical variability and inappropriate therapeutic inertia¹. Electronic therapeutic protocols (eTPs) for diabetes and heart failure were introduced in Greece, to inform and guide prescribing practices. Yet, user (i.e., physician) satisfaction with them has not been evaluated to date. We run a quantitative survey to assess value, user-friendliness, data safety, and interconnectivity with other State platforms of eTPs in diabetes and heart failure amongst general practitioners (GPs) and cardiologists in Greece.

Methods

Participants received an email invitation containing a link to an online survey from the Athens Medical Society, the official scientific partner of eTPs. The survey included 4 sections: a) who (sample demographics, average use of technology and availability of administrative/support staff, b) what (is the added value of therapeutic protocols in clinical practice?), c) how (do you feel about using therapeutic protocols in daily clinical practice?), and d) what's next? (suggestions for future improvement). A 5-point Likert scale (1=not at all, 5= very much) was used to evaluate eTPs' parameters. All responses were anonymous.

Participants' characteristics



Summary

eTPs for diabetes and heart failure have been introduced in Greece, to inform and guide prescribing practices. Though considered widely used, there has to-date been no structured evaluation of user satisfaction with them. When surveyed, GPs and cardiologists reported high satisfaction with eTPs as tools to support choice of treatment and facilitate repeat prescriptions. They also considered eTPs easy to use and relatively safe. Nonetheless, they stressed that major improvements should be performed to enhance interconnectivity with State platforms that support clinical practice as well as to update content, including updates in line with international clinical guidelines and information on drug-to-drug interactions.

Results

- Respondents reported an average daily use of technology of 4-8 hours, to manage patient records, prescribe pharmaceuticals, read new scientific developments or for personal purposes (Figure 1).
- 76% of respondents had no administrative support at their practice
- Respondents considered eTPs very useful in supporting them select the appropriate treatment and issue repeat electronic prescriptions for normalized patients. (Figure 2).
- Respondents considered eTPs' web application to be easily accessible, safe, relatively-up to date and somehow simple to use (Figure 3).
- Respondents reported, on a scale where 1 = less important priority and 5 = most important priority, improvements in interconnectivity with other State platforms as the most pressing change required, followed by improvements in content (e.g., frequent updates to reflect clinical guidelines and information on drug-to-drug interactions) (Figure 4).

Figure 1. Participant average daily use of technology

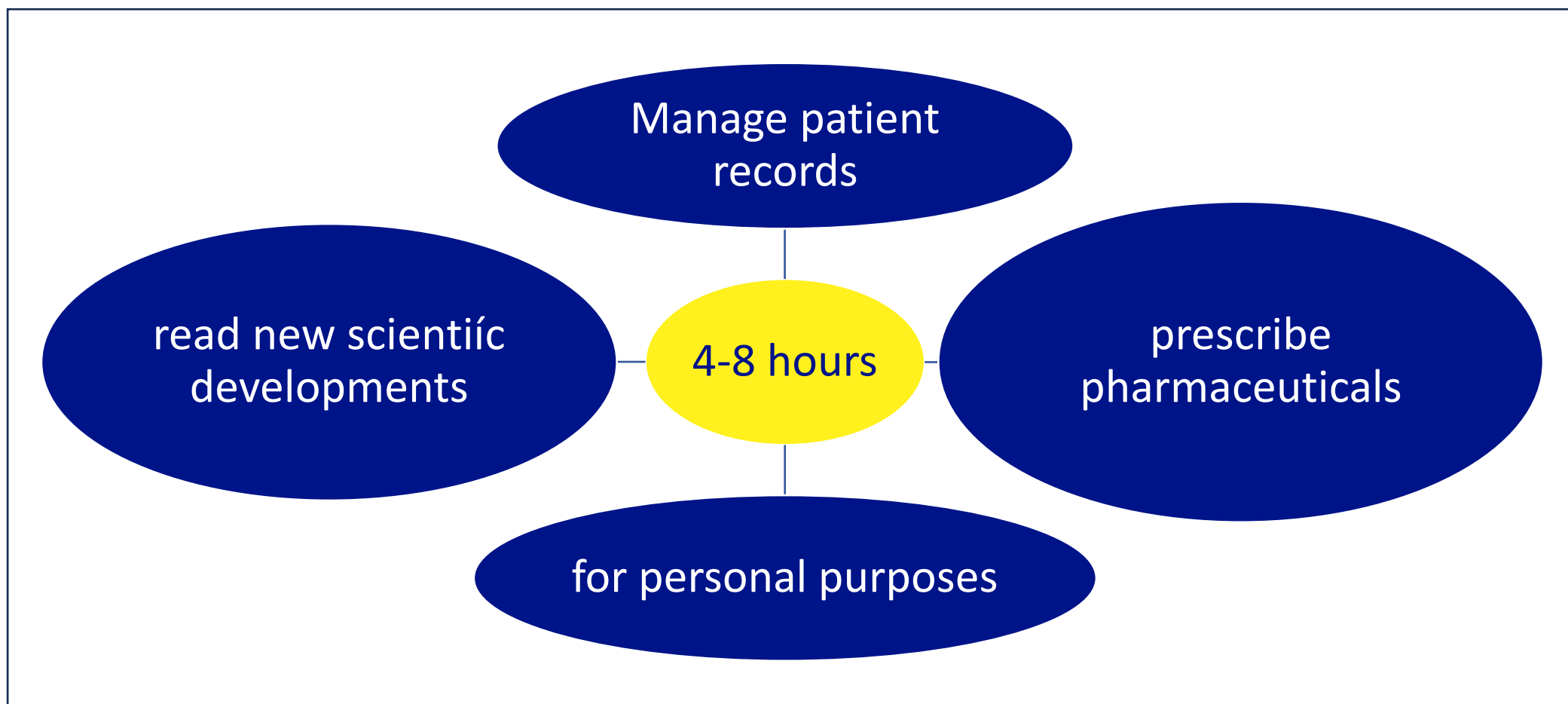


Figure 2. Major perceived usefulness of eTPs

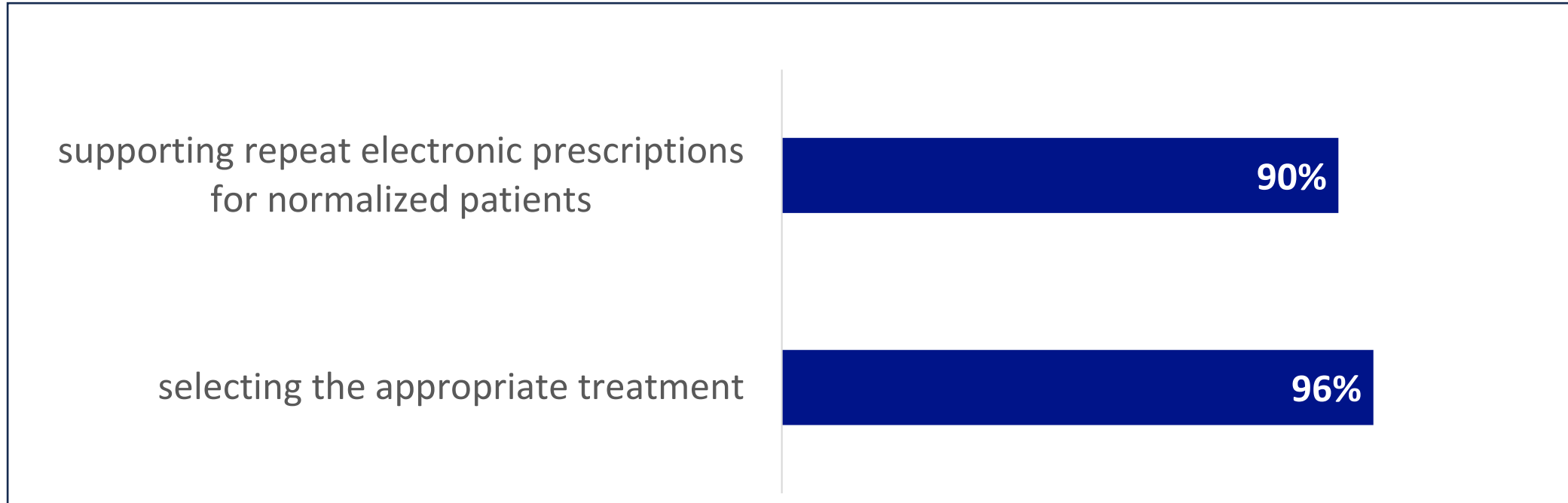


Figure 3. Perceptions of participants on eTPs web application

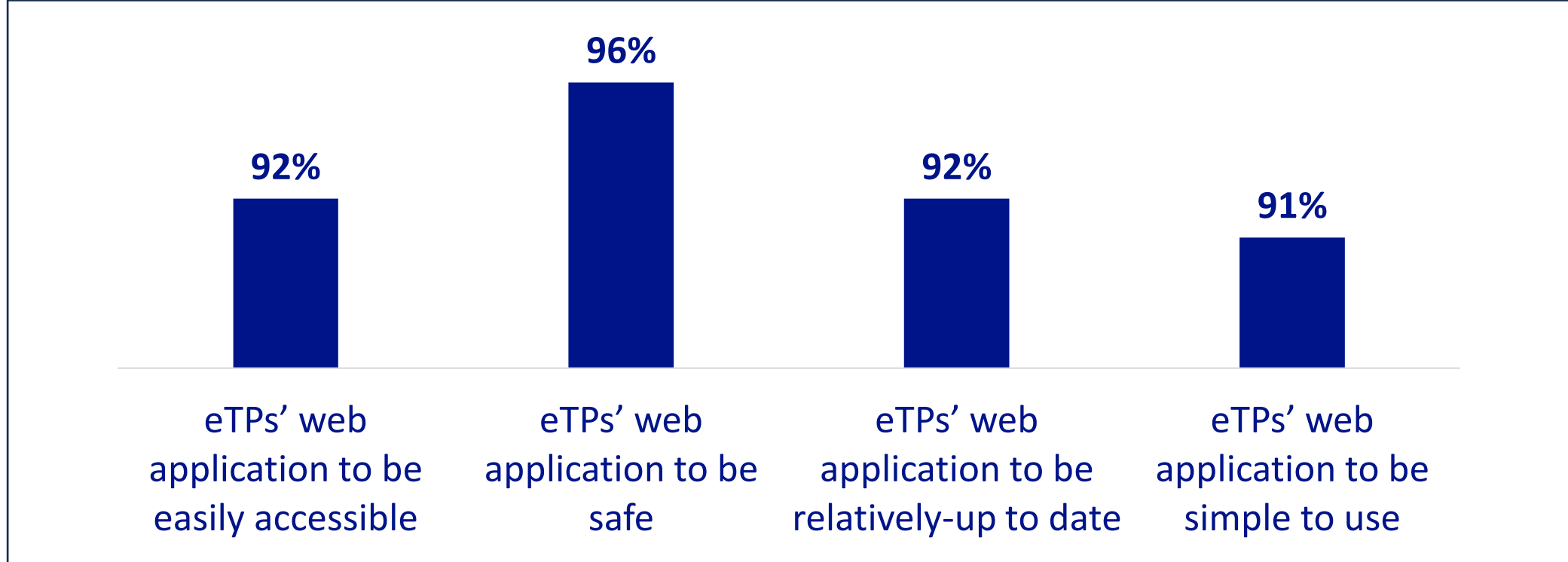
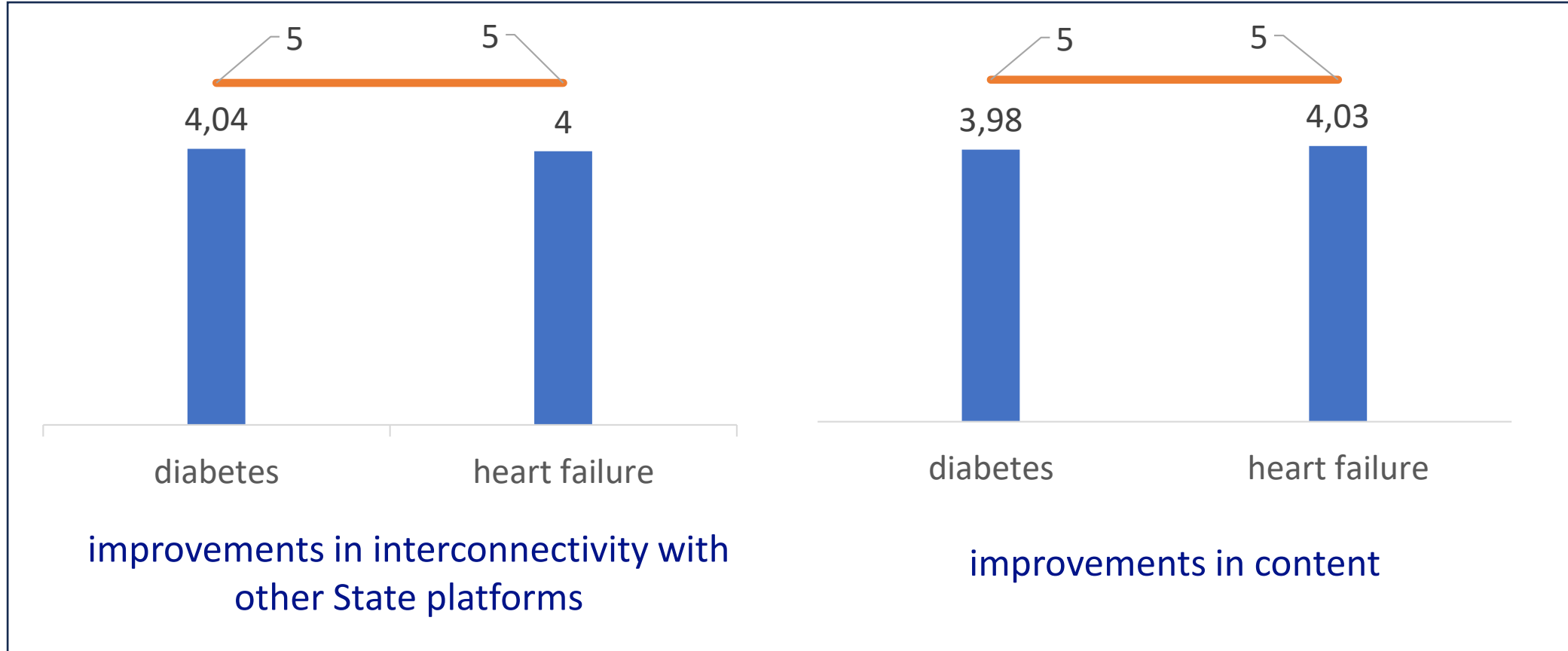


Figure 4. Priorities for improvement



Key take away

GPs and cardiologists in Greece consider eTPs for diabetes and heart failure useful in supporting therapeutic decision making and facilitating repeat prescriptions. They propose eTPs become more interconnected to other applications for patient management (such as e-diagnosis and e-prescription) and remain up-to-date and consistently enriched with latest scientific evidence, if to fulfil their potential to holistically support health care professionals using them and assure quality in care delivery.

References: 1. Frieden et al. JAMA. 2014;311:21-22
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