CHALLENGES AND OPPORTUNITIES IN THE MANAGEMENT OF CHRONIC DISEASES DURING THE ECONOMIC CRISIS IN GREECE: A QUALITATIVE APPROACH

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Introduction and Objectives

There is evidence that in Greece, the economic crisis has substantially affected chronic patients’ access to health care services. In a cross-sectional study, geographical barriers, financial barriers and barriers due to waiting lists were reported (1).

The aim of the study was to depict the current situation and identify the challenges and opportunities regarding the management of chronic diseases, in times of economic crisis and austerity from the aspect of both providers and patients.

Methods

Representatives of chronic patients and medical associations were invited to participate in a focus group session. Four diseases (Type 2 Diabetes, Hypertension, COPD, and Alzheimer) were selected based on their epidemiology and socioeconomic impact on the Greek healthcare system.

Fifteen (15) representatives participated and their statements were recorded and content analyzed employing both a deductive and an inductive approach. The main categories that emerged from the analysis are presented below.

Results

Management of chronic disease patients is characterized by several limitations which were brought forward in relation to the majority of chronic diseases. Common issues in the management of chronic diseases under study appear to be the low quality of health services, fragmented primary care system and absence of specialized units for the management of chronic diseases (especially in the case of diabetes).

Limited time devoted to patient-doctor communication on issues related to the nature and progression of the disease as well as alternative treatments and related side-effects was also considered an important problem by both patients and healthcare professionals, especially for healthcare services of the public sector. This was attributed both to organizational reasons (inappropriate scheduling of appointments), increased demand and lack of related clinician communication skills.

Other problems brought forward by participants were the low level of patient adherence to lifestyle recommendations (dietary advice, smoking cessation) as well as to pharmacotherapy, and the inadequate training of healthcare professionals specifically in the management of chronic disease patients and disease complications.

There was an negative view on the recently introduced measures. Increased patient co-payments for pharmaceuticals, consumables, and laboratory tests were seen to raise barriers in access.

Among healthcare professionals, ensured quality of all marketed generic medicines and cooperation between decision-makers and the medical community were seen as prerequisites for increased generics consumption. Organization of the quality control process according to international best practice was suggested. Prescribing using International Non-proprietary Name (INN) was not supported.

Physicians’ training on chronic disease management (both at the undergraduate level and through life-long learning) and development of multidisciplinary teams that will provide care to patients were proposed.

Furthermore, education of the patient and his/her family on self-management were also considered important.

The need for a redistribution of the financing burden and an increase in the healthcare budget was strongly emphasized.

Strengthening of PHC, development of PC networks of health services, patient registries and involvement of their associations in decision making was also considered critical to the improvement of disease management.

Finally, given the anticipated increase in the prevalence of chronic diseases, it was suggested that policy-makers need to adopt a health-in-all policies approach.

Conclusions

The management of chronic diseases was challenging even before the economic crisis in Greece, but the current economic framework poses additional threats for the health care system jeopardizing patients’ health and its sustainability due to an increased risk for future costs.

Investment in patients and physicians education regarding chronic diseases management was thought to be the key for improving this situation.

References


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