

# Population Health and Chronic Disease

# Healthcare for the Third Age

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- Canberra's demography and chronic disease
- Diabetes, Heart Failure and Lung Disease
- Secondary prevention
- Quality of care for chronic disease
- Community care, self help and self management
- Healthcare for the Third Age

# Canberra's demography and chronic disease

- Life expectancy has increased markedly over the last 20 years, and will continue to do so over the next 20.
- A key driver of this is better management of chronic diseases.
- This is playing out on the post-WW2 “baby boomer” population bulge.

# Canberra's demography and chronic disease

- Increasingly, people stay in Canberra upon retirement.
- “54/11” is over.
- Canberra has net inward migration of 75+
- 50,000 more 65+ expected in 10 years;
- 85+ will increase from 3,000 to 15,000
- They're not that well.

# Diabetes, Heart Failure and Lung Disease

- 52% of 65+ have a disease of circulatory system
- Accounting for 10.5% of hospital admissions
- 33% have a disease of the respiratory system
- Accounting for 4.6% of admissions
- 10% have *diagnosed* diabetes.
- Another 5-10% have it and don't know.

# Diabetes, Heart Failure and Lung Disease

- The management of Diabetes, Chronic Heart Failure and Chronic Obstructive Lung Disease makes a big difference to quality and quantity of life.
- Treatments are improving, but they are already pretty good.
- *Most* people with these conditions do not have optimum management.

# Secondary Prevention

- Primary prevention prevents disease.
- Secondary prevention prevents disability in people who have disease.
- Effective chronic disease management prevents disease progression, slows the natural history of the disease, and prevents or delays the development of complications.

## Secondary Prevention

- Diabetes, Heart Failure and Lung Disease all share common risk factors.
- Smoking, Nutrition, Physical Activity.
- The target groups, messages and support for health promotion need to be specially tailored to achieve secondary prevention in people with these chronic diseases.
- And combined with effective clinical care.

## Quality of care for chronic disease

- Its not rocket science – its harder than that!
- For the ACT to achieve 75% of people with diabetes, CHF & COPD having best practice management is a long term stretch target.
- Monitoring and surveillance will be crucial to any major improvement.

## Quality of care for chronic disease

- Regional Chronic Disease registers are key
- This strategy has worked for vaccination, cancer, transplants and rare diseases.
- Registers facilitate care coordination with or without a specific coordinator.
- They can support clinical care, health promotion, community activity and self help.
- They make population based health improvements *and* failures visible.

# Community care, self help and self management

- The majority of clinical care for people with chronic diseases occurs in the community.
- Much of what impacts on chronic disease progression is not one to one clinical care.
- Community based activity, mutual self help and self management have the majority impact on common risk factors.

## Healthcare for the Third Age

- U3A started in France in 1973
- It recognises the needs, skills, time and community mindedness of older people.
- The cooperative and self help movements have had a profound impact on health
- From the friendly societies of the early 20<sup>th</sup> century to the modern NGOs.

# Healthcare for the Third Age

- Clinical and population health professionals need to harness the third sector for the third age.
- Large funded NGOs, local community and self help groups, family, friends and people with chronic diseases themselves can coordinate.

## Healthcare for the Third Age

- Coordinating improved clinical care, secondary prevention and self management requires a partnership with the community.
- It can be driven by central intelligence using population health methods,
- Using innovative communication channels for microsegmented mass communication.
- To connect people to care
- And community activity.

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