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The full report is titled “Meta-Analysis: Chronic Disease Self-Management Programs for Older Adults.” It is in the 20 September 2005 issue of *Annals of Internal Medicine* (volume 143, pages 427-438). The authors are J. Chodosh, S.C. Morton, W. Mojica, M. Maglione, M.J. Suttrop, L. Hilton, S. Rhodes, and P. Shekelle.

Chronic Disease Self-Management Programs for Older Adults

What is the problem and what is known about it so far?

Arthritis, diabetes, and high blood pressure are chronic diseases of older adults that can be treated but not cured. Drugs can help to improve symptoms and to slow the progression of these diseases. However, patients who know more about their disease often do better than those who rely on drug therapy alone. Patients who work to make themselves healthy (for example, by exercising regularly or by losing weight) also do better. Health providers sometimes develop formal programs to teach patients with chronic disorders what they need to know and do to make their health as good as it can be. These programs are called *self-management programs* because patients are taught to manage more of their health themselves.

Why did the researchers do this particular study?

To see whether self-management programs improved the health of older patients with arthritis, diabetes, and high blood pressure.

How was the study done?

The researchers searched medical literature to find published research about self-management programs for arthritis, diabetes, and high blood pressure. They looked for studies that had randomly assigned patients to receive self-management programs or to receive routine health care only. The researchers defined self-management interventions as programs that helped patients actively participate in monitoring their conditions or in decisions related to managing their conditions. They assessed whether each program involved the following: tailoring to individual patients, delivery in a group setting, delivery by the patient’s usual physician, feedback, and psychological services. Then, using a technique called *meta-analysis*, the researchers combined the results of similar studies and explored whether certain elements of the programs were associated with better outcomes.

What did the researchers find?

The researchers found 53 studies that evaluated the effect of self-management programs on chronic disease. They found that, compared with usual care, self-management programs improved glucose and blood pressure control in older adults with diabetes and high blood pressure. Self-management programs offered only minimal improvement of pain and physical function in older adults with arthritis. The researchers could not identify particular elements of programs that were consistently associated with success.

What are the limitations of the study?

The researchers found evidence that some research may not have been published. In this kind of study, failure to publish research might make self-management programs look better than they really are.

What are the implications of the study?

Self-management programs may improve blood pressure and glucose control in older patients with high blood pressure and diabetes. Before such programs can be widely recommended, however, we need to learn what types of features make a program most effective.

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