THERAPEUTIC EDUCATION
OF PATIENTS

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“Nothing to disclose”
SEMANTIC MAPPING

Mappa Semantica usa una Geometria Radiale nella quale i nodi si sviluppano a raggiera a partire da un concetto centrale.

Logica Associazionistica

Intuitiva (emisfero Dx)

Creatività
Velocità

Salute

Biurezza

Rapida, spontanea

Rappresentazione grafica di significati mentali

Caratteristiche

Somministrazione

Elaborazione

Geometria Radiale

Geometria Senza

Analisi

Struttura Gerarchica

Assai, scelta

N. concetti spontanei
N. concetti secondari
N. errori / omissioni
N. nessi / associazioni

N. concetti
Area Core di

Immagine

Area Psicologica

Psicologia

Priorità Obiettivi (scelte)

Sintesi del malato

Program. Percorso successivo

Parole

Stimolo

Codice linguistico

Simboli, disegni, parole neutre

Intuitiva (emisfero Dx)

I nodi si sviluppano a raggi e procede

Dal concetto più importante a quello meno

I nodi sono associati a proprietà, pensieri, idee

Priorità Obiettivi (sicurezza)

Modo e compiti

Elementi contrattuali

Liene

Tipo di associazioni

Analisi quantitativa

Analisi qualitativa

Obiettivi conc. Con cultante

Analisi statistica

N. nessi / associazioni

N. concetti

N. concetti secondari

N. concetti spontanei

N. errori / omissioni

1° livello

Rapida, spontanea

Maieutica

Terapia

Circoscritto

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1° livello
What do patients usually ask you about medications?

Do you usually explore patients’ concern/knowledge about prescribed medications?

How do you do it?
Do you usually provide your patients with any answer or explanation?

How do you do it?

Do you usually assess what patients understand or retain of your answers?

How do you do it?
Chronically ill patients,
Fragile/aged people,
Terminally ill patients,
Psychiatric patients,
Foreign people,
Day-Hospital patients, etc.

Patients feel “powerless”
and run some risk!

WRITTEN PRESCRIPTIONS:
SOMETIMES, A REAL ENIGMA!!
O. M. S.

IN WESTERN COUNTRIES:

8 OUT OF 10 NON-HOSPITALIZED PATIENTS
HAVE A CHRONIC OR A LONG TIME DISEASE

LESS THAN 50% OF THEM OBSERVE
MEDICAL PRESCRIPTION!!
THE COST OF MEDICINES NON-ADHERENCE IN ENGLAND

Pharmacy Magazine, p. 25, April 2012

ESTIMATED COST OF WASTED DISPENSED MEDICINES EVERY YEAR: ABOUT 300M POUNDS,

APPROXIMATELY 1 EVERY 25 POUNDS SPENT ON PRESCRIPTION

AROUND 0.3 PER CENT OF TOTAL NHS EXPENSE

*York Health Economic Consortium and the School of Pharmacy, University of London, 2010

IN ITALY,

4 OUT OF 10 HOME ACCIDENTS ARE LINKED TO MEDICATION ERRORS

Osservatorio farmaci & salute, Movimento consumatori (ITALY)

EVERY DAY, IN ITALY, OVER 400 HOSPITAL ADMISSIONS ARE CONSEQUENCE OF MEDICATION ERRORS

Istituto Mario Negri

IN 2005, 52,613 ADVERSE REACTIONS TO MEDICATIONS HAVE BEEN REPORTED IN ITALY; 4,672 OF THEM WERE ATTRIBUTED TO ERRORS SUCH AS:

- WRONG DOSE (27%)
- WRONG MEDICATION (22%),

Italian Clinical Risk Management Society

BUT THERE ARE ALSO:

oversight, omission, carelessness, misunderstanding, auto-medication, wrong ingestion, multi drug and conflicting treatments, old age, cognitive impairment, illiteracy, linguistic barriers, suicide attempts, etc.
SOME DIFFICULTIES OF PHARMACIST’S REAL LIFE:

- OLD PEOPLE
- CAREGIVERS
- FOREIGN PATIENTS
- ADOLESCENTS/CHILDREN AND THEIR PARENTS
- GENERIC MEDICATIONS
- UNCLEAR OR CONFLICTING PRESCRIPTIONS

BUT ALSO:

- TIME SHORTAGE/TOO MANY PEOPLE TO ATTEND
- LACKING DOCTOR-PHARMACIST COMMUNICATION
- THE PLACE OF PHARMACIST IN CLINICAL SETTINGS
- ACKNOWLEDGEMENT OF INSTITUTIONAL PATIENT EDUCATION ACTIVITY (!?), ETC.

What do patients usually ask for?

EMPATHETIC LISTENING, FEELING SAFE AND CONFIDENT

UNDERSTANDABLE ANSWERS

COHERENT, CLEAR AND FEASIBLE PRESCRIPTIONS

TO KEEP THE RIGHT OF ULTIMATE DECISION
ANXIETY, EMOTIONS, FEARS, EXPECTATIONS

"BEHIND" THE PATIENT

stress

Marcolongo - Ané, Barcelona 26-28 March 2014

denial, refusal

anxiety, depression

anger, panic, confusion

INTERNET DRIVEN
MENTAL REPRESENTATIONS
OF PATIENTS

"BEHIND" THE PATIENT

GENERIC MEDICATIONS …

Nothing about me without me.
Valerie Billingham. Through the Patient’s Eyes.
TO PROMOTE BEHAVIOURAL CHANGE AND EMPOWERMENT IN PATIENTS

WE MUST GO BEYOND BARE INFORMATION

BY TEACHING/TRAINING THEM TO BECOME AWARE OF WHAT THEY ACTUALLY NEED TO SELFMANAGE THEIR DISEASE AND TREATMENT
THERAPEUTIC PATIENT EDUCATION (TPE)

**EMPOWERS** patients and their families to:

**understand** *(Knowledge - Awareness)*

*illness and its treatment*

**carry out** *(Know-how – Self-management)*

*therapy in a correct and safe way*

**adopt** *(Attitude – Self-confidence)*

*a safe and healthy behaviour*

**preserve and improve** *(Motivation - Change)*

*health and quality of life*

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TPE: A SHARED AND SYSTEMATIC APPROACH TO LEARNING / EDUCATION

- Educational diagnosis
  - (shared need assessment by questionnaires, semantic map, etc.)

- Contracting an “education agreement”, defining a “safety agreement”
  - (shared choice of goals, negotiation of a proactive behaviour)

- Follow-up
  - (re)training/new training

- Shared assessment of learning and outcomes, reinforcing feed back

- Patient training
  - (and/or self-training)
**TPE: some educational techniques/approaches**

1. **Individual TPE**  
   (motivational interview, semantic mapping, mentoring, counseling, coaching in person, by telephone, by internet, etc.)

2. **Small groups TPE sessions:**
   - Key-words, brainstorming
   - Collective conceptual mapping
   - Focus group
   - Video
   - Role playing
   - Collective games
   - etc.

3. **Family based TPE**

4. **Community based** (summer camps, health residencies, etc.)

5. **Tablet/smartphone/computer app** (serious games)

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**TPE: some teaching tools**

- photo, images, video, written memo or summary, therapeutic plan, practical examples, teaching cards, pedagogical questioning, computer/smartphone/tablet app, etc.
How can the pharmacist participate in TPE?

1. Understanding the patient: his/her knowledges, representations, fears, wishes,…

2. Elaborating a specific therapeutic plan negotiated with the patient, his/her habits,…

3. Assessing with the patient what he/she understood and give him/her some take home messages.

4. Assessing with the patient what he/she really does at home.

1/ Understanding the patient:
   1. Need to create a self-confident atmosphere

   ➔ Active listening, open questions: some examples

   What do you understand about what happened to you?
   Which perception do you get about what happen to you?

   How do you feel the risk of your illness?

   How do you feel the needs of the treatment?
   Their benefits?

   How do you feel benefits & disadvantages of your treatment?
1/ Understanding the patient:

2. What does the patient know about generics?

Example of question cards

Example of answer cards
**1/ Understanding the patient:**

3. **What is the patient used to do?**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Tablet &amp; Capsule</th>
<th>Breakfast</th>
<th>Lunch</th>
<th>Appetizer</th>
<th>Wake-up</th>
<th>Rest</th>
<th>Bed-down</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Spare-time</td>
<td></td>
<td></td>
<td></td>
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</tr>
<tr>
<td>Spare-time</td>
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<td></td>
</tr>
<tr>
<td>Work</td>
<td></td>
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</tr>
<tr>
<td>Spare-time</td>
<td></td>
<td></td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sport</td>
<td></td>
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<td></td>
</tr>
</tbody>
</table>

**2/ Elaborating a specific therapeutic plan**

1. **What is it for? How to take the treatment despite habits & constraints (life/treatment/illness)?**

<table>
<thead>
<tr>
<th>NAME</th>
<th>GENERIC</th>
<th>Wake-up</th>
<th>Breakfast</th>
<th>Lunch</th>
<th>Evening</th>
<th>Bed-down</th>
<th>WARNING / INFORMATIONS</th>
</tr>
</thead>
<tbody>
<tr>
<td>IMMUNOSUPPRESSOR</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Ciclosporin 1</td>
<td></td>
<td></td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td>1 hour before meal, no grapefruit juice, regular time</td>
</tr>
<tr>
<td>Ciclosporin 0.75</td>
<td></td>
<td></td>
<td>1</td>
<td>1</td>
<td></td>
<td></td>
<td>1 hour before meal, no grapefruit juice, regular time</td>
</tr>
<tr>
<td>Ciclosporin 0.5</td>
<td></td>
<td></td>
<td>2</td>
<td></td>
<td></td>
<td></td>
<td>take it during meal, regular time</td>
</tr>
<tr>
<td>ANTI-INFECTIOUS</td>
<td></td>
<td></td>
<td>1/4</td>
<td></td>
<td></td>
<td></td>
<td>antibiotic, to protect from infectious disease, during meal</td>
</tr>
<tr>
<td>CARDIAC TREATMENT</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Carvedilol 2.5</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>take it during meal, blood thinner</td>
</tr>
<tr>
<td>Captopril 12.5</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>take it during meal, blood thinner</td>
</tr>
<tr>
<td>Other Treatment</td>
<td></td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td>vitamins, complement</td>
</tr>
</tbody>
</table>

*Council:* you have to drink at least 2 liter of water per day, be regular in your drugs time taking, to follow a diet no much salted, neither sugar and low fat. You have to do a regular sport activity. In case of doubt, just ask to your doctor or your pharmacist.
2/ Elaborating a specific therapeutic plan

2. Exploring patients’ knowledge about side effects. Which one did they already get? Which one could they get?

- What happens to you?
- With the treatment which drug is allowed, which one isn’t?

I have stomach ache
My skin is dry
I got fever
I feel so tired
I feel anxious
I have...

• How did you manage them? Did it work or not? Next time will you do the same?...

I go directly to the emergency
I drink a lot of water
I take the treatment I have
I call my doctor
I go to do sport

Developed by GSK – Alliance Médica – Temps Clair
3/ Assessing with the patient what he/she understood and providing him/her with some easy take-home messages.

Let him/her explain what he/she is going to do. Let him/her show you how he/she will use the medical disposable items…

4/ Assessing with the patient what he/she really does at home.

- True-false Quiz, self-administered quiz
- Therapeutic plan
- Narrative,…

<table>
<thead>
<tr>
<th>Question</th>
<th>True/False</th>
</tr>
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<td>a) Plasmids are found in bacterial cells.</td>
<td>True/False</td>
</tr>
<tr>
<td>b) The gene for production of insulin is placed in human DNA.</td>
<td>True/False</td>
</tr>
<tr>
<td>c) Some bacteria naturally produce insulin.</td>
<td>True/False</td>
</tr>
<tr>
<td>d) Enzymes are used to remove the human gene for insulin.</td>
<td>True/False</td>
</tr>
<tr>
<td>e) A large amount of insulin can be produced by bacteria.</td>
<td>True/False</td>
</tr>
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</table>
4/ Assessing with the patient what he/she really does at home.

- True-false Quiz, self-administered quiz
- Therapeutic plan
- Narrative,…

It’s important to carry out a «shared» assessment

1. Plasmids are found in bacterial cells.  
2. The gene for production of insulin is placed in human DNA.  
3. Some bacteria naturally produce insulin.  
4. Enzymes are used to remove the human gene for insulin.  
5. A large amount of insulin can be produced by bacteria.
SOME CRUCIAL QUESTIONS to be addressed

Which place for the pharmacist in TPE?
Which place for the pharmacist in a TPE team?
Which educational tools for the pharmacist?
Which is the better way to train pharmacists to TPE?
Which TPE strategy to target patient’s risks?
Which TPE strategy for generic drugs?
Which TPE strategy to improve patient’s adherence?
Which TPE strategy for different groups of patients?
Which incentive/acknowledgement for TPE activity?

SOME REFERENCES