

Latvian Early Intervention Concept development

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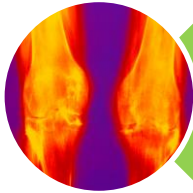
Musculoskeletal system diseases limiting plan in Latvia (2014-2017)

- **The national plan of care of patients with arthritis was developed in order to:**
 1. improve/optimize the pathway from onset of symptoms of pain to final diagnosis
 2. appropriate effective and safe therapy
 3. focus to diagnosis of early autoimmune arthritis - timely detection and correct treatment during maximum of 16 weeks from onset of symptoms to diagnosis and treatment.
- This plan was performed out within framework Fit for Work (supported by Abbvie/Abbott) Latvia

National importance of patients with autoimmune arthritis

- In Latvia year by year is increasing initial disability of musculoskeletal diseases, as well as the total number of sick, leading to growth of incapacity for work
- Most disabling MSDs are autoimmune arthritis: Rheumatoid arthritis, Juvenil idiopatic arthritis, Psoriatic arthritis and Ankylosing spondylitis
- From those diseases suffer both sexes of working age and childbearing age (18- 40 years) and the return to work for this group of patients is of national importance

PARADIGM



Inflammation is harmful



Inflammation may be cured



Inflammation multiplied by the time is damage



Joint damage = disability and incapacity for work



- So time is one of the most important factors in the prevention of disability in patients with autoimmune arthritis
- Unifying frame provides early diagnosis of arthritis and timely started treatment

Returning to the paradigm (I)

- Effective use of time is essential in the diagnosis of arthritis and timely started of adequate treatment
- Unfortunately, in Latvia the situation prevents timely diagnosis of early autoimmune arthritis:
- In Latvia number of rheumatologists is insufficient (0, 7 rheumatologists / 100 000 inhabitants,) according to the EULAR guidelines for the optimal number of rheumatologists are needed 1,5- 2 rheumatologists / 100 000 inhabitants)
- State agencies do not allocate enough places for rheumatology residents to eliminate deficit of rheumatologists in the country
- These **2 factors** lead to long waiting time (4-5 month) for the initial rheumatologist consultation

Returning to the paradigm (II)

- EULAR guidelines state that the diagnosis of autoimmune arthritis must be made in 12-16 weeks from the onset of pain
- The long waiting time for the initial rheumatologist consultation led the Latvian Association of Rheumatology to develop autoimmune arthritis patient flow chart within Fit for Work project in Latvia
- Practical implementation of patients' flow is provided in the Centre of Rheumatology in P.Stradins Clinical University Hospital, where the largest number of rheumatologists in Latvia is concentrated

Effectively used time

- **Effectively used time means –**
- Patients visit rheumatologists timely, they specify the procedures and standardize tests for each of arthritis patient
- Coordinated multi team work (patient, family physician, rheumatologist, radiologist, physical therapist, etc) and dynamic follow up the patients

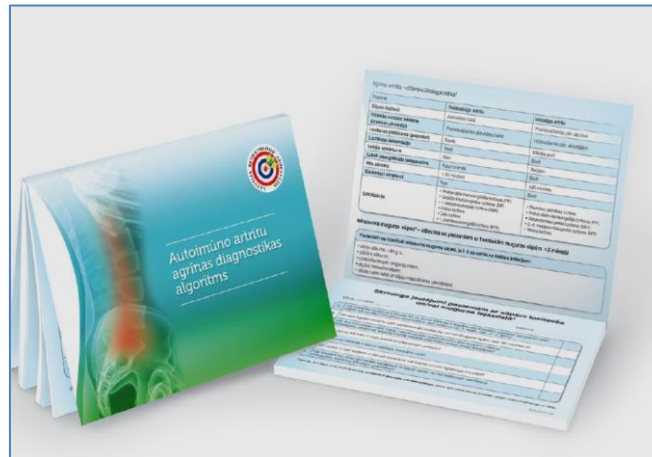


Chronic and progressive inflammatory disorder, characterised by synovitis and severe joint destruction, if left untreated



Implementation of patients flow chart in practice (I)

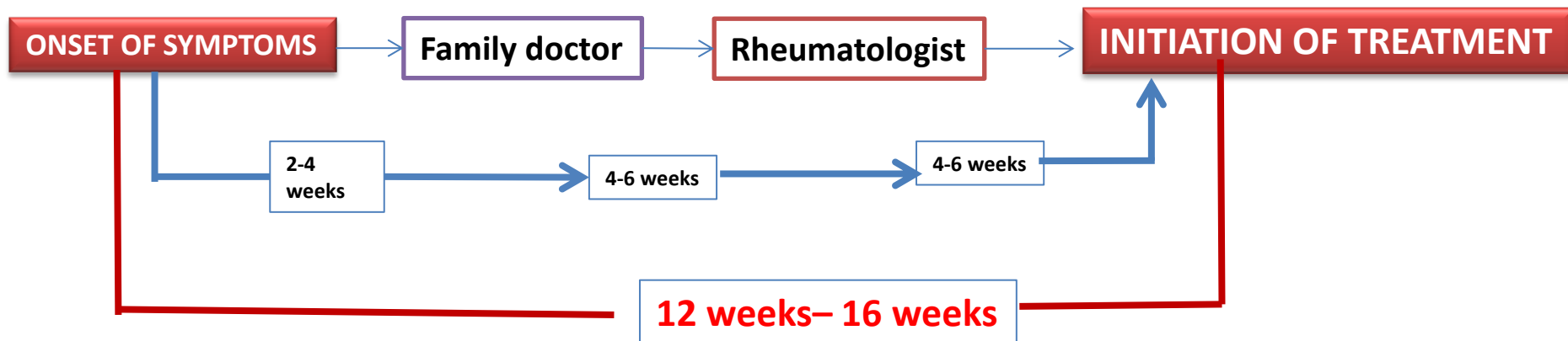
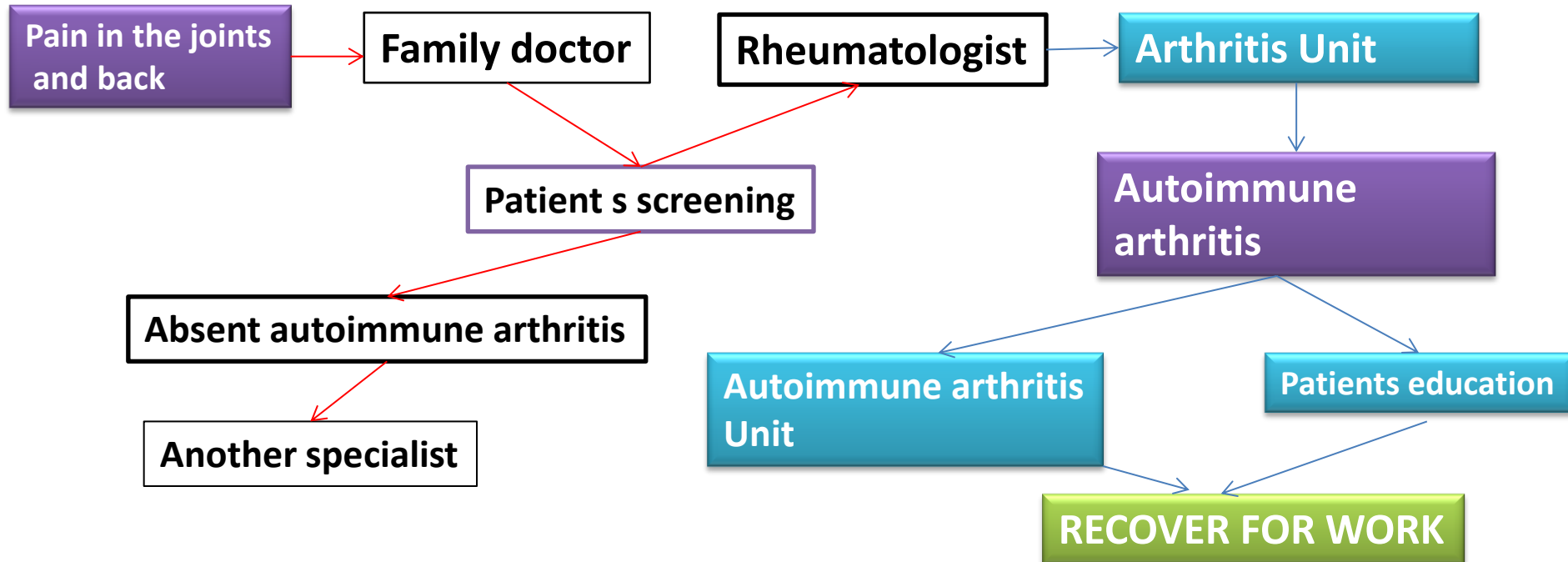
1. A patient with pain in the joints or back pain turns to a family doctor
2. The family doctor uses algorithm, designed by rheumatologists, for screening of autoimmune arthritis - 7 questions about inflammatory classification and minimum of laboratory analyses and radiological investigations



3. If the clinical-laboratory findings point to a possibility of autoimmune arthritis patient is sent to a rheumatologist

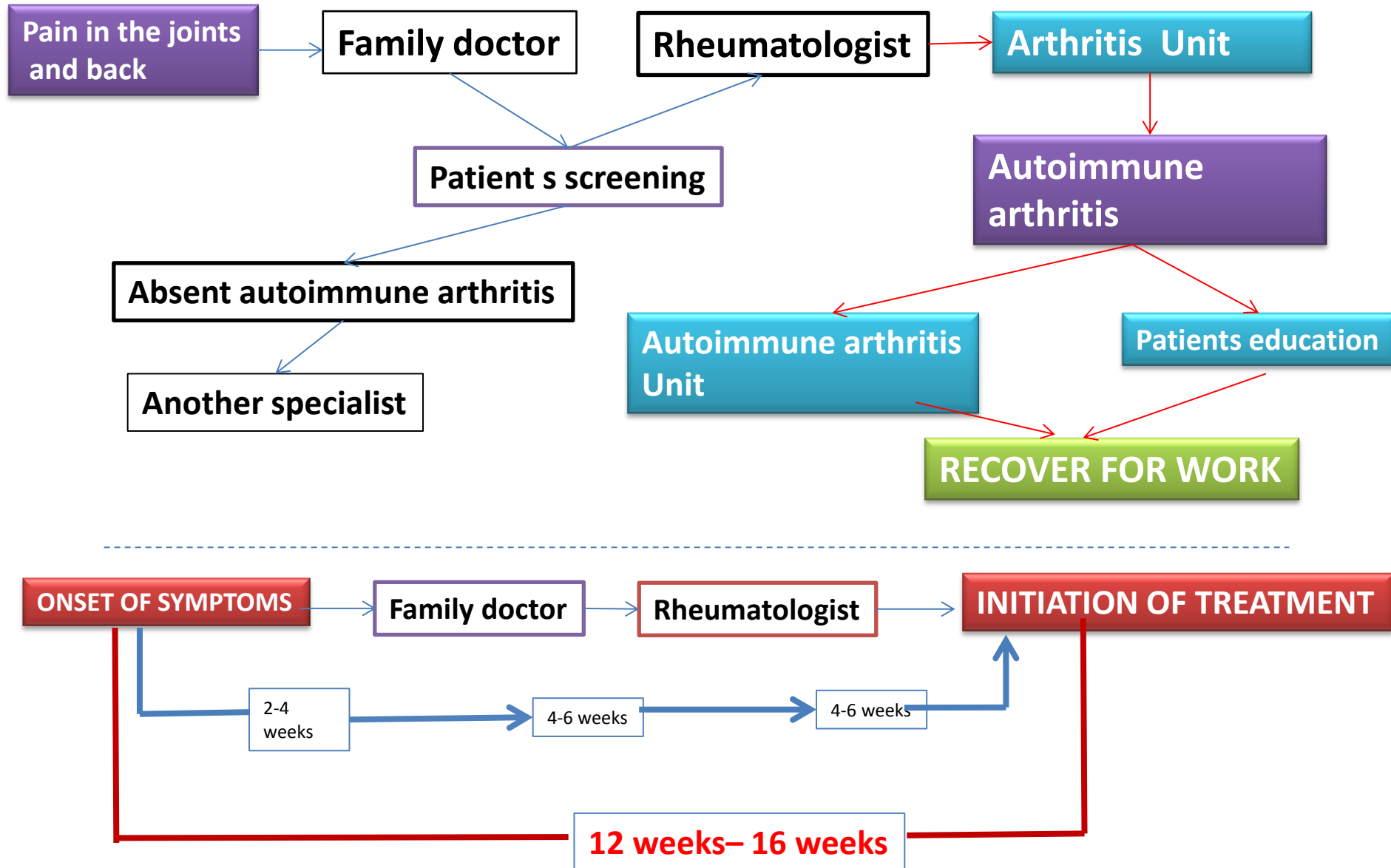


Early Intervention Concept : timely diagnosed autoimmune arthritis realized within the rheumatic patient flow (I)





Early Intervention Concept : timely diagnosed autoimmune arthritis realized within the rheumatic patient flow (II)





Implementation of patients flow chart into practice (III)

Autoimmune arthritis unit

- Council of Rheumatologists , assign the most appropriate biological drug for an individual patient
- Designation of the biological tests before initiation of treatment in order to ensure patient's safety
- Intravenous administration of biological drugs
- Prepared Database of biological drug patients for creating register
- Dynamic observation of patients 4 times in a year
- The preparation of a drug replacement in case of adverse reactions



Education as early intervention Concept

■ Rheumatology school:

- Educational courses for Family doctors - autoimmune arthritis : specific aspects of anamnesis, joint and spine examination principles
- In total in 2013 and 2014 were organised 14 such seminars
More than 350 Family doctors were educated in the School of Rheumatology till now

■ Education for nurses in rheumatology

■ Patients education – Patient' s Academy



Patient's education

- **Patient's education principles :**
 - Right information
 - Right time
 - Right way
 - Right people
- **Rheumatologists teach patients with autoimmune arthritis in the Patients Academy**



Patient's education

The old world

- Passive role
- Paternalism
- Patients as service users
- Limited rights/
- Limited responsibilities

The new world

- Active role
- Equal partners
- Patients as consumers of services
- Responsible patients

Belgian Presidency of He European Council
Ministerial Conference
Innovative approaches for chronic illness in Public Health and
Healthcare systems
20 October 2010



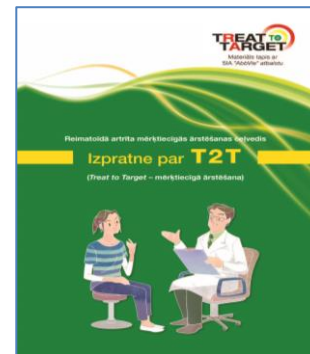
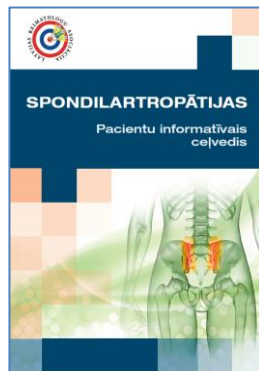
Patient's Academy (I)

- Patients arrive at the Academy with their husbands or wives in order to understand their problems
- Lectures to the patients and their relatives are presented by both rheumatologists and other specialists
- Patients are educated about various joint diseases, treatments and prognosis
- Patients come into contact with people with similar illnesses

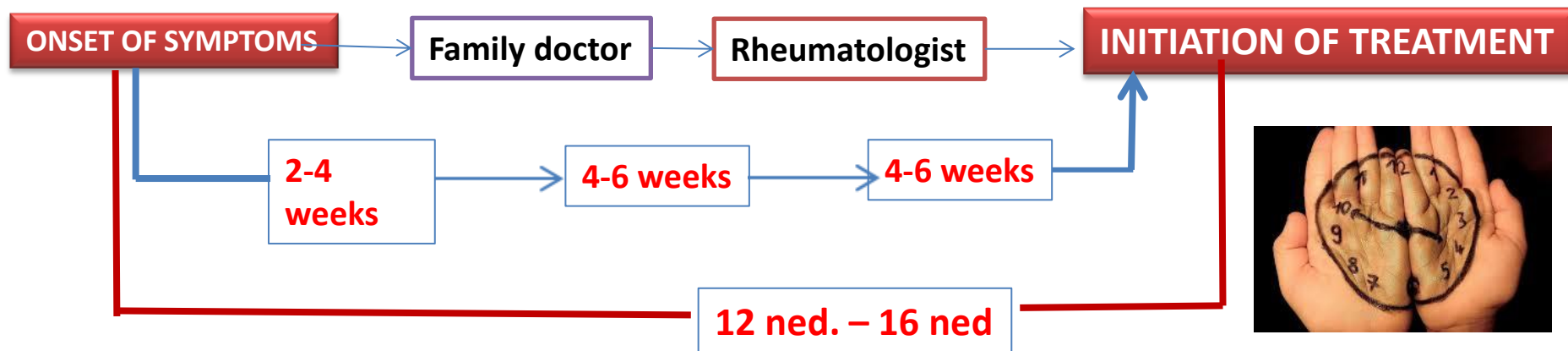
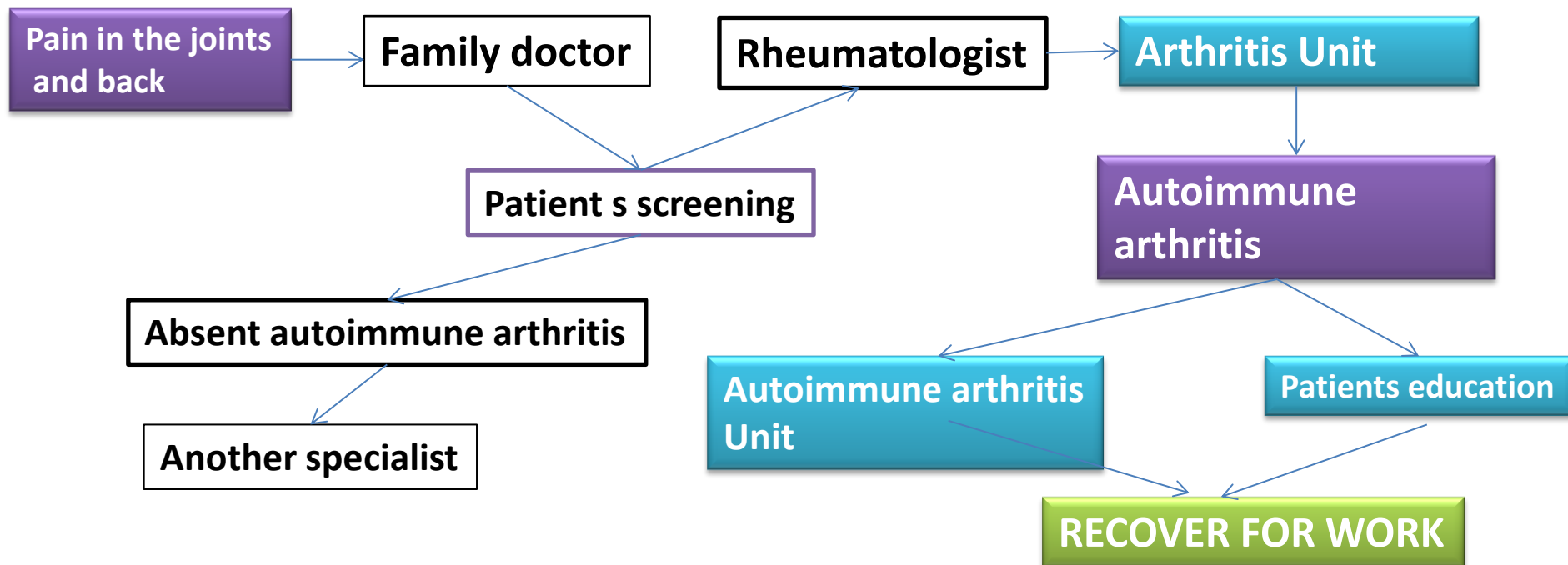


Patient's Academy (II)

- Patients should have possibility to ask the lecturer questions about their illness and get answers
- The importance of confidence and compliance is explained to provide effective treatment
- Informative material is hand outed to patients



Early Intervention Concept : timely diagnosed autoimmune arthritis realized within the rheumatic patient flow (III)





Latvian Early Intervention Concept Summary (I)

1. Established rheumatic patient's flow provides clear rheumatic patient's care system
2. Arthritis units allow timely diagnose arthritis and initiate adequate therapy
3. Biological drug user's register provide dynamic observation of treatment and patient's safety control



Latvian Early Intervention Concept Summary (II)

5. Multi Teamwork provides comprehensive patient's care
6. Education of family doctors and patients provides the modern therapy target - to reach the disease remission or at least the lowest activity (T2T)
7. Economically used time in autoimmune arthritis patient's care, provides early diagnosis and accurate initiation of treatment, ensures successful return to work

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Thank you !

