Transparent environment for expressing consumers needs and preferences

Johan Hjertqvist
HCP
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The European idea

• Consumer preferences should not be expressed (maybe patient wishes)!
  • Weak patients part of the historic concept
  • Equity, solidarity
  • Rationing rather than demand driven

• Weak insurance/payor competition
• Weak competition among providers
• Piecemal open information.
Are the needs met: where to find hospital information web portals?
The missing link

Expert knowledge

Consumer-focused “market information”

Health advice – diet, exercise *et cetera*
Why let the consumer in?

• The old system has failed!
• Values
  • Informed choice an overwhelming standard
  • “Make yourself heard” – democratic expansion
  • Be in control
• Personalised care
  • From general guidelines to tailor-fit treatment
• Outcomes
  • Fewer complications with involved users
  • Adherence of medicines reduces waste
• Economics
  • Self-management will be part of the solution!
Hinders for individual engagement

- A long way to attractive content and design of information
- Mutual lack of trust in the communication
- Outcomes data fragmented and rare
- Low mobility – poor use of centres of excellence; weak market integration forces (vision: seamless EU market)
- Very limited price transparency
- In politics, healthcare is still considered a cost problem rather than a strategic growth opportunity.
EU steps in!

- The Cross-border Healthcare Directive
- Confirms our statement – new drivers necessary!
- Strong need for industry standards to increase productivity and efficiency
- From 2014, open compulsory reporting of a.a.:
  - National quality and safety standards/systems
  - Hospital performance
  - Hospital treatment prices (based on what?)
- User-friendly design and access.
Most frequent health use of the Internet (US)

Third most popular Internet activity, after e-mail and search
• 68% info about drugs
• 49% self-diagnosis
• 39% info about another’s condition
• 45% did not think they could find health info online, yet 82% want to
• 48% of all health searches are on behalf of someone else.

Most popular health sites are U.S.-based. These include NIH, WebMD, Medicine.net, Mercola and Mayo.
Where patients seek information about medicines
in France, Germany, the NL, Sweden and the UK

- A publicly accessible book contains all medicines leaflets.
- Printed versions of any leaflets are available from pharmacists on request.
- Pharmacists will tell patients about (but not show patients) the contents of any leaflets on request.
- Printed versions of any leaflets are available from doctors on request.
- Doctors will tell patients about (but not show patients) the contents of any leaflets on request.
- Patients can read any leaflets on the Internet, in their own language.
- Patients can read any leaflets on the Internet, but only in a foreign language.

Health Consumer Powerhouse

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Comprehensive layman-adapted information about all registered drugs available on the www (2009)...
…and “FASS-style websites” 2011

Austria: www.austriacodex.at/avmain/
Denmark: http://medicin.dk/
Estonia: www.raviminfo.ee
Finland: www.fimea.fi/lakemedel/produktresumeer/humpl
France: www.doctissimo.fr
Germany: www.onmeda.de
Hungary: www.ogyi.hu/drug_database/
Italy: www.prontuariofarmaci.com
Norway: www.liegemiddelverket.no/custom/templates/gzInterlFrame_1548.aspx
Portugal: www.infarmed.pt/infomed/inicio.php
Slovakia: www.liekinfo.sk
Sweden: www.fass.se
Switzerland: www.kompendium.ch
U.K.: http://emc.medicines.org.uk/

In addition, there are websites with information on pharmaceuticals appearing in additional countries. This is rapidly expanding in Europe.
Soon in your mobile (US)

Mobile phone, PC services:
• Test results
• Messages to and from doctors and staff
• Guides to GP:s, dentists and hospitals
• Appointment history, reminder of next appointment
• Complaints reporting and procedures
• Medical records
• Patient education
• Medications and allergies – e-prescriptions
• Immunizations
• Reminders for preventive care
• Patient reporting to stem heart failure readmissions
• Virtual doctors for HIV care management
• Online messaging for depression and drug addicts care
• Support for caregivers
• Etc.
From fancy apps to systems communication

• Liberate resources for qualified care – make patients take care of segments not requiring professional competence
• Build a pressure for quality improvement – options to avoid second class care
• User comments, polls and ratings
• Self management/care provider support
• All stakeholders involved!
Thank you!

Read more about the impact from the Cross-Border Care Directive at

www.healthpowerhouse.com

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Improving healthcare since 2004