

# BMBF network for health service research PRO PRICARE (Preventing Overdiagnosis in Primary Care)

## Speaker

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## Aims and structure

In the tender issued by the BMBF concerning the structural development of health service research the target was set to further strengthen cooperation networks. PRO PRICARE, funded by BMBF with 2.1 million euros for three years (2017 – 2020), engages in the development and practical implementation of measures to prevent over- and undersupply in health care. It consists of:

- Seven academic institutions of the FAU
- Four medical practice networks in Franconia with around 200 general practitioner (GP) and specialist practices
- The Bavarian Association of Statutory Health Insurance Physicians (KVB)
- Company health insurance carriers, represented by the GWQ ServicePlus AG

Medical overuse is defined as “care in the absence of a clear medical basis or when the benefits of therapy do not outweigh the risks”. Distinctions between ageing, risk factors, early stages of illness, and the actual disease itself became more and more blurred. Advances in medical technology, spirit of medical entrepreneurship, and the cultural phenomenon of increasing occupation with health matters harbor the risk for an “inflation of disease”. Patients that are affected by an impending risk of overtreatment as well as medical interventions with low or non-existing benefit need to be identified and the latter reduced. One of the main responsibilities of a family doctor is the prevention of mis- and overtreatment and medication, since they – as generalists and first and last contacts – are normally the entry point into the health system for most patients and provide long-term supervision of the patient’s health.

## Research

Within the scope of PRO PRICARE, three research projects conducted in the current funding phase:

### ICF (International Classification of Functioning, Disability and Health)

Development of a core set of the International Classification of Functioning, Disability and Health (ICF) for geriatric patients in primary care. The medical focus traditionally lies on the illness rather than on the disease of the patients. Particularly among elderly people, this inevitably leads to overtreatment. A prioritization of medical measures is therefore unavoidable. The effect size of a given treatment on preservation or recovery of functionality of individual measures could be a criterion for distinguishing between beneficial and less beneficial ones. For this purpose, functionality needs to be describable. Generally, the ICF could be an adequate tool for that. However, the ICF is far too complex to be used in the fast-paced environments of GP practices. Therefore, the development of so-called ICF core sets is required. Our hypothesis is that with a concentration on functional health, a reduction of overtreatment, particularly among elderly people, is possible. Such core sets for geriatric patients in GP practices are developed in four subprojects following international standards.

Cooperation partners: Institute for Biomedicine of Aging, Interdisciplinary Center for Public Health (IZPH)

### ICE (Ideas, Concerns, Expectations)

The focus of this study is the doctor-patient communication. Communication skills are an important tool that can prevent unnecessary medicine. Patients are coming into practices with subjective ideas about their illness and with their own concerns and expectations. These should be elicited and discussed in the GP consultation. It is examined whether patient-centered communication according to the ICE technique helps to reduce the application of unnecessary diagnostic procedures among patients with acute back pain. Furthermore, simple supporting tools for an improved communication in the daily practice are developed.

Cooperation partners: Department of Clinical Psychology and Psychotherapy (Faculty of Humanities, Social Sciences, and Theology), Chair of Health Management (Faculty of Business, Economics, and Law)

### ACE (Adverse Cascade Effects)

Adverse Cascade Effects: Causes and routes of clinical pathways for patients with thyroid nodules

Cascades are “processes that proceed in a step-wise manner from an initiating event to a seemingly inevitable conclusion”. One example is the treatment of people with thyroid nodules. Thy-

roid nodules can contain thyroid cancer. On the other hand, it is rather scarcely that people die from thyroid cancer. The frequency of thyroid carcinoma has increased sharply over the last decades without the same increase in mortality rates. Presumably, the cause for this lies in overdiagnosis. The detection of thyroid nodules in ultrasound images is commonly a trigger of cascade effects that can lead to unnecessary invasive treatment.

So far, there are no systematic analyses available to determine the frequency of occurrence, the driving forces, and the effects of this cascade. This project aims to fill this gap by analyzing the clinical pathways of patients with thyroid nodules.

Cooperation partners: Chair of Health Management, IZPH, Institute of Medical Informatics, Biometry and Epidemiology  
Health insurance data are provided by the KVB and the GWQ.

## Teaching

The Young Researcher Program is a fundamental part of the PRO PRICARE research network and pursues the following aims:

- Methodical and content-related training in the field of health service research
- Promotion of networking and interdisciplinary exchange

The program addresses doctoral candidates of the network and aims to strengthen the interdisciplinary exchange and networking. The trainees come from different institutes and centers of UK Erlangen and FAU. They are trained methodically and content-related to work in the field of health service research. Seven doctoral candidates are currently part of the program. A mentor is assigned to each participating doctoral candidate. Together they can discuss job strategies, career plans, as well as formal and informal aspects of the PhD thesis. The trainee receives additional feedback and suggestions at the annual meeting with the external scientific advisory board which consists of international experts in the field of health service research and oversupply. An annual retreat enables the trainee to present own research in a larger college.

Furthermore, an extensive seminar program is provided with subject-specific and interdisciplinary content in the field of health service research. The trainees receive input from an experienced lecturer in order to deepen the methodical and content-related knowledge in the fields of health economics, public health, geriatric medicine, psychology, and general medicine with regard to health service research, oversupply, and demographic change.