A patient-centred intervention to improve the management of multimorbidity in general practice: the 3D RCT

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Plain English summary

The 3D RCT

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Plain English summary

Some people have several long-term health conditions (called 'multimorbidity'). They often have poor quality of life and may need to take lots of drugs and attend numerous medical appointments. These patients say that their care is not joined up and that they may not be treated as a whole person.

We tried to improve care by designing the 3D (Dimensions of health, Depression and Drugs) approach. Instead of separate appointments for each health condition, patients got a 6-monthly review to consider all their problems together, with one general practitioner taking responsibility for their care. The review focused on patients' needs, their quality of life and their mental as well as their physical health, and tried to simplify their medication. Patients were also given an agreed written plan for their future care.

We tested this approach in 33 general practices. Sixteen practices picked at random were trained to provide the 3D approach and the other 17 continued with usual care. In these practices, 1546 adult patients with three or more long-term health conditions took part. We looked at the costs and benefits of the 3D approach compared with usual care over 15 months. We also interviewed patients and staff to find out how the approach worked in practice.

The 3D approach puts into practice many ideas that are currently recommended to improve care for patients with multimorbidity. Patients and staff liked the approach, although practices struggled to introduce these new ways of working. The 3D approach did not lead to improved quality of life or health or reduce the number of drugs prescribed or appointments attended. However, patients did say that care was more joined up and better at treating them as a whole person, and 3D was provided at little additional cost. Providing care in a way that patients prefer could be sufficient justification for rolling out the 3D approach more widely.

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