

# PEARLS

## Practical Evidence About Real Life Situations



Des efforts importants pour aider les malades chroniques à s'adapter à leur situation. Peut-être d'une utilité restreinte mais un signal perceptible de changement de paradigme: la maladie sort enfin de la seule consultation médicale pour être aussi considérée par rapport à la vie quotidienne des patients et de leur entourage.

Bruno Kissling

L'enseignement 1:1 a du succès non seulement auprès des étudiants mais aussi auprès de nous médecins. C'est très précieux pour une information neutre. Pour l'accueil des représentants en pharmacie, nous devons aussi être conscients de l'impact, même s'il n'est pas dominant.

Bruno Kissling

### Lay-led self-management education programmes can be effective

PEARLS No. 54, April 2008, written by Brian R. McAvoy

**Clinical question:** How effective are lay-led self-management education programmes for people with chronic health problems?

**Bottom line:** Lay-led self-management programmes may lead to small, short-term improvements in participants' self-efficacy, self-rated health, cognitive symptom management, and frequency of aerobic exercise. No adverse events, such as complaints, were reported in any of the studies. Chronic conditions included arthritis, diabetes, hypertension and chronic pain.

**Caveat:** The programmes did not alter quality of life, number of visits to doctors, or reduce the amount of time spent in hospital. While many of the programmes were similar, they differed in which conditions were studied, which outcomes were measured and effectiveness of the programmes. Follow-up was limited to 6 months or less in most of the studies.

**Context:** Self-management education programmes led by lay-leaders (rather than health professionals such as doctors or nurses) are becoming a common way to promote self-care for people with chronic conditions.

**Cochrane Systematic Review:** Foster G et al. Self-management education programmes by lay leaders for people with chronic conditions. Cochrane Reviews 2007, Issue 4. Article No. CD0005108. DOI: 10.1002/14651858.CD0005108.pub 2.

*This review contains 17 trials involving 7442 participants.*



### Educational outreach visits can influence prescribing

PEARLS No. 107, February 2008, written by Brian R. McAvoy

**Clinical question:** Can educational outreach visits (EOVs) affect professional practice or patient outcome?

**Bottom line:** EOVs alone or when combined with other interventions have effects on prescribing that are relatively consistent and small, but potentially important. Interventions that included EOVs appeared to be slightly superior to audit and feedback.

**Caveat:** The effects of EOVs on other types of professional performance vary from small to moderate improvements. It was not possible for this review to explain the variation.

**Context:** EOVs (also known as academic detailing or educational visiting) are personal visits by a trained person to health professionals in their own settings.

**Cochrane Systematic Review:** O'Brien MA et al. Educational outreach visits: effects on professional practice and health care outcomes. Cochrane Database of Syst Rev. 2007, Issue 4. Article No. CD000409. DOI: 10.1002/14651858.CD000409.pub 2.

*This review contains 69 studies involving 15 000 health professionals.*

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### PEARLS

PEARLS are succinct summaries of Cochrane Systematic Reviews for primary care practitioners. They are developed by the Cochrane Primary Care Field and funded by the New Zealand Guidelines Group.

PEARLS provide guidance on whether a treatment is effective or ineffective. PEARLS are prepared as an educational resource and do not replace clinician judgement in the management of individual cases.

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