

## Technology to head off 'tsunami of chronic disease'

### Geelong (4 September, 2009)

The launch today\* of the national roll-out of a Chronic Disease Management Network (CDM-Net) is able to head off what one of Australia's foremost e-Health experts calls a "tsunami of chronic disease" facing Australia.

Professor Michael Georgeff of the Faculty of Medicine, Nursing and Health Sciences at Monash University says CDM-Net tackles the most urgent and challenging global problem in healthcare – the prevention and management of chronic disease.

Professor Georgeff\*\* is also founder and Chief Executive Officer of Precedence Health Care (PHC), a company providing Internet-based chronic disease management services for the health profession. PHC led a consortium of 13 organisations (see additional information attached) in two trials to test whether CDM-Net and its core Chronic Disease Management Service (CDMS) could improve the care of chronically ill patients while increasing efficiencies and reducing costs.

CDMS enables all members of a patient's healthcare team to share and track the patient's healthcare plan and to collaborate on treatment.

CDMS creates evidence-based care plans individualised to the patient and shares the patient's plan and health record with the care team and the patient. It then monitors the care plan, ensuring that the care team follows up on treatments, and helps the patient to self manage by sending them reminders and alerts.

Professor Georgeff says CDMS helps realise many of the objectives identified in the National Primary Health Care Strategy and the recent report from the National Health and Hospitals Reform Commission. "CDMS will greatly increase the efficiency of care management and will make high quality healthcare equally accessible to metropolitan, rural, remote, and indigenous communities."

Professor Georgeff, said CDMS had been successfully tried among more than 700 patients in the Barwon South Western Region of Victoria and in the Eastern Goldfields of WA over a period of twelve months.

"The trial results have been exciting. Our initial data is showing a doubling of evidence-based care getting into practice. There is a 60% increase in the use of managed care plans and a 140% increase in team collaboration. Follow up and review of the care plan has gone up more than 500%."

"This level of collaboration is previously unknown in primary health care. The clear success of the trial projects – supported financially by both the federal and Victorian Governments - have now prompted a move to roll out CDMS nationally," Professor Georgeff said.

A Geelong GP who took part in the trial, Dr Arthur Pape, said CDMS was, for many chronically-ill patients, the difference between having a care plan or no plan at all.

“Before CDMS, putting in place a care plan was cumbersome and highly labour-intensive. It might have taken an hour to make the necessary contacts and to provide relevant information – an hour, frankly, that few GPs can afford to spend on one patient. Now, in just minutes, using CDMS I can upload all the necessary information – including pathology results – and get this to all team members.

“The outcomes are positive for me in the time saved and for the patient in terms of getting best practice care. It is clearly the future for chronic disease management,” added Dr Pape.

Dr Pape’s view was reinforced by Paul Cohen, Deputy CEO of Barwon Health, the region in which a major part of the trial was undertaken.

Mr Cohen says a critical issue today is the integration of information across different health care providers who are involved managing a patient’s care. Given that chronic illnesses are becoming more prevalent, Barwon Health was keen to see how CDMS could both contribute to better integration with the wider care team.

“It is clear from the trial results that CDMS can deliver better outcomes for chronically-ill patients and this is likely to translate into fewer hospital admissions. The electronic age in health care, particularly in the management of patients with chronic diseases, has arrived and represents the future,” Mr Cohen added.

Professor Georgeff said the benefits of a national rollout were huge. “Chronic disease is responsible for 70% of Australia’s healthcare costs or \$60 billion per annum. It has a devastating impact on quality of life and mortality for over 30% of Australia’s population. It is a massive burden to the community, costing over \$800m per year for diabetes alone. And it drags down workforce productivity by an estimated 584,000 person-years or approximately 10% of the total workforce.”

“The ageing population will further blow out these numbers and health care as we know it will cease to exist. Highly innovative systems, such as CDM-Net, using broadband and mobile technologies and building on the National Broadband Network, are key to overcoming this challenge.”

A major partner in the trials project, IBM, believes the health of Australia's economy is directly linked to the health of its citizens.

“The rising cost of healthcare services, which is now almost 10 per cent<sup>A</sup> of GDP, the shortage of clinical skills and access to health information is pushing Australia's health system to the limit,” says Fiona McMaster, Vice President, Industry Solutions, A/NZ & Asia Pacific, IBM Software Group.

“The better use of health information and thereby improving the management of chronic diseases such as diabetes, heart disease and stroke through CDM-Net, represents an important step towards a smarter, more efficient and ultimately, more effective healthcare system in Australia. This benefits everybody including, importantly, the patients themselves,” Fiona McMaster said.

CDM-Net also offers major export opportunities for Australia.

“Technologies such as CDM-Net will enable Australia to take a leading position in the Collaborative Care market, estimated by Forrester Research to be worth US\$60 billion by 2015. We are already exploring opportunities in Oman, the US and China. The potential is there for a \$1 billion plus export industry in Australian e-Health products and services where we can establish a world leading position,” Professor Georgeff added.

**Further information:  
Professor Michael Georgeff  
0411 193 247**

**Mr Paul Cohen  
0408 996 228**

**Dr Arthur Pape  
03 5278 1122**

**\*By Senator Stephen Conroy, federal Minister for for Broadband, Communications and the Digital Economy**

**\*\* Professor Georgeff is also a principal adviser to government and industry in the US, Europe and Australia on information technology strategy in health care and e-business and serves on the boards of various companies**

**^ Source of statistic:**

*\*The Australian Industry Group and IBM Australia recently released a blueprint outlining what Australia needs to do to enter the next growth phase and build a more sustainable economy. 'Towards a Smarter Economy: A roadmap to making it happen' summarises the discussions between forty of Australia's senior public and private sector leaders who met on 30 April in Sydney at the Australian Leadership Forum (ALF). The Blueprint also proposes a roadmap for developing Australia's intelligent infrastructure over the next ten years.*

**Entities involved in the trials were:**

Precedence Health Care  
Barwon Health (Vic)  
GP Association of Geelong  
IBM  
Dept Human Services  
Multi Media Victoria  
Diabetes Australia (Vic)  
Deakin Uni  
Monash Uni  
Victoria Uni  
CSIRO Australian e-health Research Centre  
Cisco Systems  
Intel  
Global Health