

New behavioral strategies may help patients learn to better control chronic diseases

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One of the most important health problems in the United States is the failure of patients with chronic diseases to take their medications and do all that is necessary to control their illnesses.

In a study published online in the [Journal of General Internal Medicine](#), UCLA researchers and their colleagues suggest that physicians take a serious look at tools and strategies used in [behavioral economics](#) and [social psychology](#) to help motivate their [patients](#) to assert better control over [chronic diseases](#). Breaking large goals into smaller, more manageable parts, for example, may help patients better manage diseases such as diabetes, the researchers say.

Diagnosing diseases and discovering effective treatments aren't the only challenges facing [health care professionals](#) in the United States, said Braden Mogler, the paper's lead author and a third-year medical student at the David Geffen School of Medicine at UCLA and Charles R. Drew University of Medicine and Science.

"One of the big challenges is simply finding ways to help the many patients with chronic diseases understand why treatment is important and how to follow it," Mogler said. "Many doctors often lack effective tools to encourage patients in these ways. There is a lot of research from the social sciences on [human behavior](#) and encouraging individual change, and this paper shows how that research can potentially be applied to doctor–patient interactions."

In the study, the researchers highlight the shortcomings of some approaches frequently used to try to get individuals to control their diseases, such as scaring patients, overwhelming them with technical information, and focusing on consequences that are far in the future.

They then identify several tools used by psychologists and behavioral economists that can change behavior but which have not been employed often in medical care, and suggest that research on such alternative approaches is an urgent need. These approaches include:

- Helping patients form very specific plans to achieve their health goals—for example, identifying the time when they will take their medicines, having them determine what they will do if their prescriptions run out and they don't have a doctor's appointment, and giving them a place to record whether they took the medicines.
- Breaking big goals into smaller tasks that get patients to their ultimate goal step-by-step—useful for goals like extreme weight loss, adhering to medication regimens and checking blood sugar every day, or exercising several times a week.
- Using cash payments to patients as a motivator to get them on track but supplementing that with strategies that will increase their desire to stay healthy and live longer.

If studies show these techniques make a difference, they might improve health and decrease health care costs, said co-author Dr. Martin Shapiro, chief of the division of general internal medicine and health services research at the David Geffen School of Medicine at UCLA.

"Helping patients get their chronic diseases under control sometimes requires changing medications but mostly comes down to helping patients understand why treatment is important and how they can follow

it in their busy lives," Shapiro said. "There is a lot of exciting research on how we can help people change to achieve their goals in other fields, and we believe translating those ideas to health care is an important next step in medical research."

The study's authors found that some of these techniques are being used to a limited degree in [health care](#) settings—helping patients quit smoking by settling on an exact quit date, for instance, has proven more effective than speaking in general terms about quitting soon. Still, many other potentially effective techniques have not been studied in medical settings, and the authors stress the need for clinical trials to evaluate their effectiveness.

Provided by University of California, Los Angeles

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