EVIDENCE-BASED HEALTH PROMOTION FACT SHEET Stanford University's Chronic Disease Self-Management Program (CDSMP): Healthier Living

The Problem

Chronic disease – the principal cause of disability and the major reason for seeking healthcare – accounts for over 70% of all healthcare expenditures. Almost 75% of people aged 65 years and older have at least one chronic illness, and about 50% of people aged 65 years and older have two chronic illnesses.

The Intervention

- Peer-facilitated self-management workshop that meets 2 ½ hours per week for six weeks
- Developed by Stanford University Patient Education Research Center
- Promotes patient activation by teaching behavior management and personal goal setting
- Addresses topics such as diet, exercise, medication management, cognitive symptom management, problem solving, relaxation, communicating with healthcare providers, and dealing with difficult emotions.
- Requires two trained lay/peer facilitators
- Online version soon to be available

The Evidence

✓ Denotes Statistically Significant Evidence Relating to Improvements in Patient Outcomes

Study	Pain	Fatigue	Depression	Exercise	Self- Efficacy	Health Distress	Communication with Physicians	Health Status
Lorig, Sobel, et al. (2001)	1	✓	√	✓	✓	✓	✓	√
Kennedy, Reeves, et al. (2007)		✓	✓	✓	√	✓	✓	✓
Lorig, Ritter, & Gonzalez (2003)	1	√		✓	√	✓	√	*
McGowan (1998)	✓	✓	✓		✓	✓	✓	
Lorig, Ritter, & Jacquez (2005)	✓			✓	✓	✓	✓	✓
Sobel, Lorig, & Hobbs (2002)		√			✓	✓	✓	√
Lorig, Ritter, et al. (2001)		√		√		✓	✓	√
Lorig, Sobel, et al. (1999)		✓		✓			✓	✓





Statistically Significant Evidence Relating to Reduction in Healthcare Utilization

Study	ER Visits	Outpatient Visits	Hospital Days	Hospital Nights	Cost Savings Ratio
Lorig, Ritter, et al. (2001)	Reduced	Reduced	N/A	N/A	N/A
Sobel, Lorig, & Hobbs (2002)	0.2 Fewer	2.5 Fewer	.97 Fewer	.8 Fewer	1:4
McGowan (1998)	N/A	1.95 Fewer	.16 Fewer	1.54 Fewer	N/A
Lorig, Sobel, et al. (2001)	0.1 Fewer	.4 Fewer	.5 Fewer	N/A	1:4

California Medical Groups Offering CDSMP to Patients

- Kaiser Permanente
- AltaMed Health Services
- Facey Medical Group
- The Health Trust

- **Desert Oasis Medical Group**
- Catholic Healthcare West
- Riverside Medical Clinic
- HealthCare Partners

Locations Where CDSMP is Offered

- 47 states and the District of Columbia
 - 30 Counties throughout CA
- Internationally in 21 Countries
- Hospitals/Medical Groups

- Community-Based Organizations
 - Senior/Community Centers
 - Senior Housing Sites
 - Churches/Temples

Endorsing Organizations

- Administration on Aging
- National Council on Aging
- Centers for Disease Control and Prevention
- California Department of Aging
- California Department of Public Health

- California Association of Physician Groups
- Catholic Healthcare West
- Kaiser Permanente
- The Health Trust
- Group Health Cooperative of Puget Sound

Web Link of Key Information

http://patienteducation.stanford.edu/programs/cdsmp.html

Key Articles

Kennedy, Reeves, et al. The Effectiveness and Cost Effectiveness of a National Lay-Led Self-Care Support Programme for Patients with Long-Term Conditions: A Pragmatic Randomised Controlled Trial. Journal of Epidemiology and Community Health (UK), 2007; 61:254-261

Lorig, Ritter, and Gonzalez. Hispanic chronic disease self-management. Nursing Research, 2003, Nov/Dec, Vol 52, #6, pp 361-369.

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Lorig, Ritter, and Jacquez. Outcomes of Border Health Spanish/English Chronic Disease Self-management Programs. The Diabetes Educator; 2005, 31; pp 401-409.

Lorig, Sobel, et al. Evidence Suggesting That a Chronic Disease Self-Management Program Can Improve Health Status While Reducing Hospitalization. Effective Clinical Practice. 1999, Vol 37(1), pp 5-14.

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McGowan. Implementation and Evaluation of the Chronic Disease Self-Management Program in the Yukon. Yukon Chronic Disease Self-Management Program Evaluation, Fall 1998

Sobel, Lorig, and Hobbs. Chronic Disease Self-Management Program: From Development to Dissemination. The Permanente Journal, Spring 2002, Vol. 6, No. 2, pp 15-22.