



Multimorbidity

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Improving care for people with more than 1 long-term health problem

Many people in the UK are living with long-term health problems. These may be conditions such as high blood pressure, diabetes, heart disease or arthritis, and mental health problems such as depression and anxiety. Other types of health problems include long-term pain, having learning disabilities, sight or hearing loss, and having problems with alcohol or drugs. When people are living with more than 1 of these types of problem, healthcare professionals call this 'multimorbidity'.

NICE has written advice (a guideline) for healthcare professionals such as doctors, nurses and pharmacists who provide care for adults. It looks at how to help people who may find it hard to cope with their different health problems – not everyone with more than 1 condition needs this help. NICE's advice should help to join up their care and focus on the things that matter most to them. This information explains NICE's advice.

Why is this important for you?

NICE wants people to get the best care no matter who they are and where they live.

NICE's advice on care for people with more than 1 long-term health problem aims to improve your life by:

- helping you and your doctor to look at all of your conditions together
- making sure that your doctor finds out how your health and your treatments affect you
- making sure that your doctor knows what you want from your treatments
- helping you to reduce the number of medicines you are taking, if this is what you want to do
- cutting down on the number of different appointments you need to go to
- making sure that everyone involved in your care works together and shares information about your health and your treatments.

Your healthcare team should know what NICE has said about options for people with more than 1 long-term health problem. Ask them about these and talk to them if you do not think you are being offered the choices that NICE has said you should have.

Will this help me?

Usually health problems are dealt with one by one, but if you are finding it hard to manage with your different health problems it can help to look at all your treatments and care together.

NICE had said that GPs should think about doing this if you:

- need to see lots of different healthcare professionals, who may be in different places such as GP surgeries, clinics or hospitals
- have both physical and mental health problems
- have had more than 1 fall
- often need unplanned or emergency care
- find it hard to cope with all your tests and treatments, including medicines, physiotherapy and therapies for mental health or other problems

• need to take a lot of medicines regularly (for example, more than 10).

In one of your routine appointments your GP might ask if you would like to review your overall care. They may do this if you are taking a lot of medicines regularly or are having a lot of unplanned or emergency care. If you are worried, you can ask your GP about whether a special appointment to talk about your care would help.

What will my GP want to know?

No two people with a health condition are the same so it is important to think about what matters most to you before you talk to your GP. You and your GP should work out a plan for your care that suits you. This could mean stopping, starting or changing a treatment or medicine if you choose to. You may find it helpful to have a family member or carer with you for this conversation.

Things to think about before your appointment

You might want to think about some of the things that are important to you before you talk to you GP, such as:

- How do your health problems affect you? How do you feel about that?
- Are your treatments helping, or do you have any side effects that cause you problems?
- Is it difficult to get to your healthcare appointments? Are they a long way from your home? Is it hard to fit them around work and caring for family?
- What matters most to you about your health and everyday life? For example:
 - Is there one problem that bothers you more than others?
 - Are you most concerned about symptoms like pain that you have now, or worried about the chance of future problems such a stroke?
 - Are you worried about losing your independence?
- How important is it for you to work, or take part in particular activities, sports or hobbies?

Help with making decisions

If you think you may want to stop or change some of your medicines, you need to have enough information to make a decision that is right for you. Your GP should talk with you about:

- how much each medicine is likely to help you over time (for example, does it make you
 more or less likely to have another serious health problem such as a stroke?)
- any side effects, such as if a medicine makes you constipated or unsteady on your feet, or makes you feel drowsy
- what it might mean for you if you stop taking a medicine
- whether there are other medicines you may prefer that have different risks or benefits.

Some medicines are taken to help with symptoms, such as pain, and you are the best judge of how well they are working. But some medicines are taken to lower your chances of problems happening in the future. For example, statins are used to help prevent you having a stroke or heart attack. Decisions about these 'preventive medicines' are often harder because it is more difficult to know how much they are helping you day to day.

Your GP can talk to you about the evidence for medicines you are regularly taking to help you understand the possible benefits and risks of taking them. For example, if you've been taking bisphosphonates for 3 years to lower your risk of breaking a bone, your GP should talk to you about whether or not you would like to stop them. They should explain there is no clear evidence that carrying on with them will protect you against breaking a bone any more than if you stopped.

If you stop a medicine and later feel that you need to take it again, you can discuss this with your GP at any time.

Making a plan

You and your GP should agree a plan for the future that helps to improve your care and quality of life. This should say who will coordinate your care across different health and care services and what to do if you need care urgently. It should also say what has been agreed about any changes to medicines, treatments or appointments, and when you should be seen again. Your plan should be given to you in a way that is easy for you to use

and understand. Your family members or carers can also have a copy if you agree.

Questions you could ask

Here are some examples of questions you could ask your GP during an appointment to talk about your treatments and care.

Lifestyle and support

- These are the things that really bother me about my health and treatments. Can we discuss them please and think about what we might do about them?
- I don't feel I'm making progress with my health problems. Is there anything else that might help? Or do I need to see a different specialist service?
- What can I do to stay as independent as possible?
- Where can I get reliable information about help and support?
- How can I involve my family in discussions about my care?

Medicines

- Do I really have to take all these tablets? Can we look at whether I could stop taking any of them?
- I'm not sure what some of my medicines do? Can we talk about what they're for and agree whether I need to carry on with them?
- Can you tell me about preventive medicines? What are they? Am I taking any? If so, are they likely to be helping me? Are there any I could stop? Are there any I should think about starting?
- Are there any other medicines that might help with my problems?

Decisions about treatments

What information do you have to help me make decisions about treatments?

- Can you explain benefits and risks to me, please? What might they mean for me?
- Can I stop any treatments if I want to?
- Can I try changing medicines and change back again if I want to?
- I'm having some symptoms which I had not expected. For example, I have pain in my joints/muscle cramps/dry eyes/loss of appetite/loss of interest in sex/problems sleeping [or another problem not mentioned here]. Could these be anything to do with my treatments? What can we do about this?
- I know I need some of my medicines to keep me alive. But I feel so tired all the time and I'm sleeping so much in the day. If I cut back on some of my treatments, would this improve how I feel and by how much? Would it shorten my life and if so, by how much?

Healthcare appointments

• I'm finding it really difficult to get to all my healthcare appointments. Are there other options such as a 'phone appointment or a Skype call?

Where can I find out more?

Age UK 0800 169 6565 www.ageuk.org.uk

Carers Trust 0844 800 4361 www.carers.org

You can go to <u>NHS Choices</u> for more information on long-term conditions. You may also find useful information and support on a range of health issues at <u>Healthtalk</u>, where you can see and hear people's real-life experiences.

NICE is not responsible for the quality or accuracy of any information or advice provided by these organisations.

What are NICE guidelines?

NICE gives advice to staff working in health and social care. Our guidelines help them to look after people with different conditions and needs. We wrote this guideline with people who have been affected by more than 1 long-term health problem and staff who work with them. All the decisions are based on the best research available. You can read the guideline written for people who work in health and care services.

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Accreditation

