



# **Anticipatory Care & principles of patient health education**

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# Anticipatory Care

## Learning Objectives

At the end of this session students would be able to:

- Define anticipatory care
- Recognize its importance.
- Recall levels of prevention with appropriate examples.
- Define screening.
- Recognize its principles.
- Recall criteria of screening.

# Content

- Introduction.
- Definition.
- PHC and anticipatory care.
- Level of preventive intervention.
- Screening:
  - Definition
  - Principles
  - Ethics
- Conclusion.

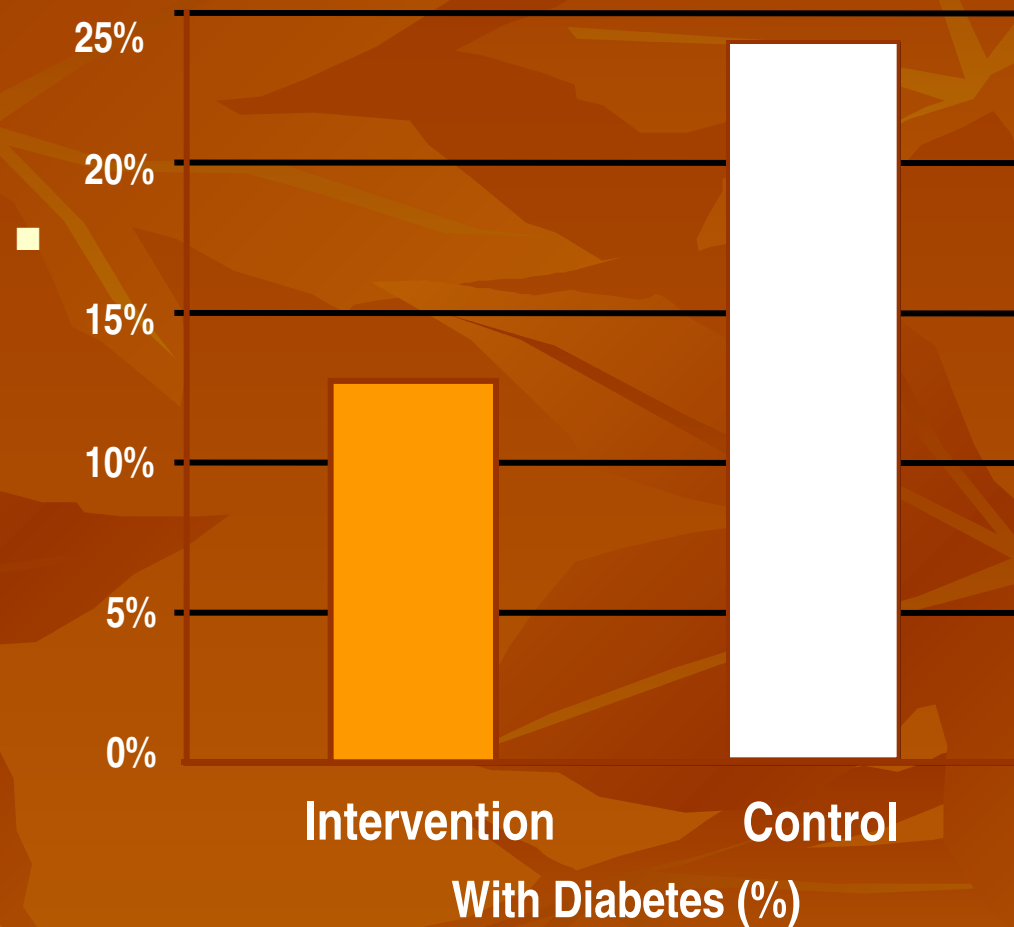
“There I am standing by the shore of a swiftly flowing-river and I hear a cry of a drowning man. So I jump into the river, put my arms around him, pull him to shore and apply artificial respiration. Just when he begins to breathe, there is another cry for help. So I jump into the river, reach him, pull him to shore, apply artificial respiration, and then, just as he begins to breathe, another cry for help. So back in the river again, reaching, pulling, applying, breathing and then another yell. Again and again, without end, goes the sequence. You know, I am so busy jumping in, pulling them to shore, applying artificial respiration, that I have no time to see who the hell is upstream pushing them all in”.

Zola, I.K. “Helping – does it matter? The problems and prospects of mutual aid groups”.

# Benefit of Treating The Metabolic Syndrome:

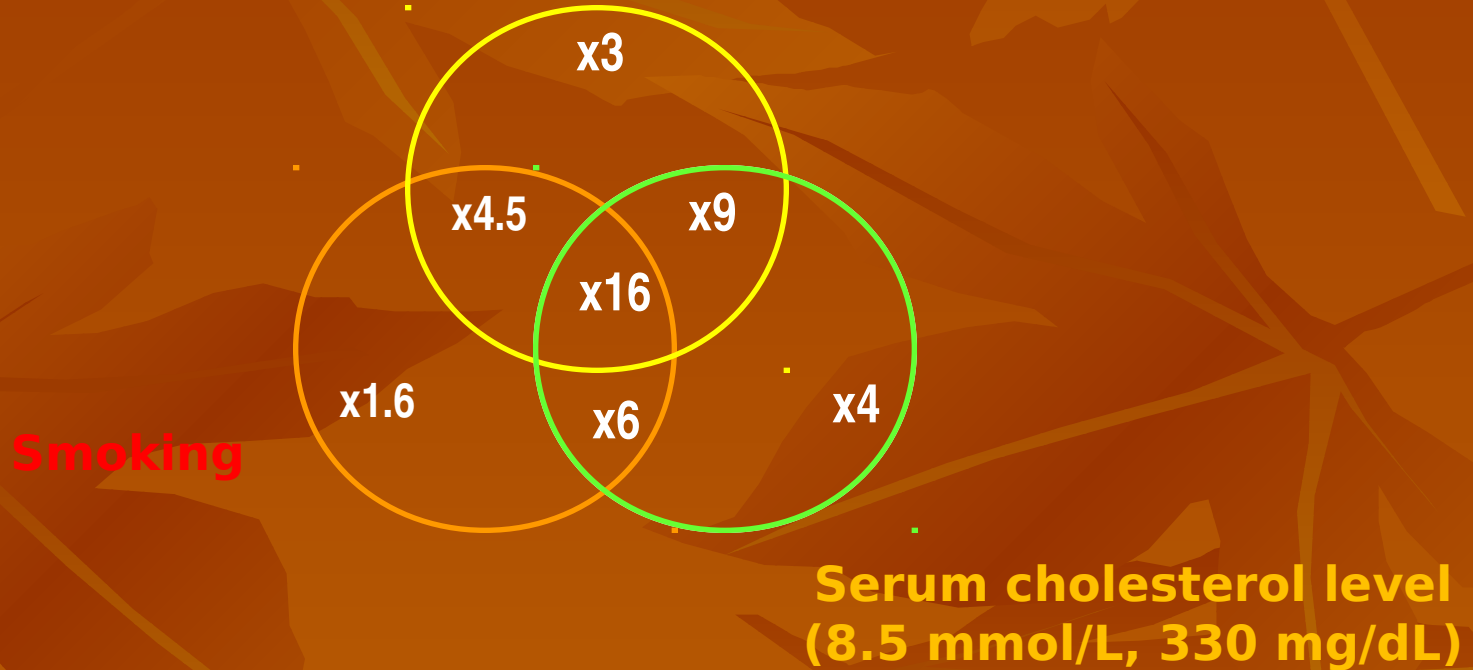
## Finnish Diabetes Prevention Study

After 4 years,  
risk of diabetes  
reduced by 58%



# Levels of Risk Associated with Smoking, Hypertension and Hypercholesterolaemia

**Hypertension  
(SBP 195 mmHg)**



# The Rule of Halves in Hypertension





**•Cost ?**

**Less attention on  
prevention??**

About six cents of every health dollar in the U.S. is  
.spent on medical and health research



Source: America Speaks: Poll Data, Vol. 5, Research!America, 2003

Less than one cent of every health care dollar in the  
.U.S. is spent on prevention research



Source: America Speaks: Poll Data, Vol. 5, Research!America, 2003.

# Iceberg Phenomenon



## What is anticipatory care?

- ❖ It include all measures which promote good health and prevent or delay the onset of diseases or their complications.
- ❖ This care aims to:
  - Improve the quality of life
  - Reduce the premature disability
  - Increased life expectancy
- ❖ So it denotes “the essential union of prevention with care and cure”  
(RCGP-1981).

# The optimum setting for anticipatory care:

## Primary Health Care.

- ❖ Frequent contacts.
- ❖ Defined population.
- ❖ Primary-care team.
- ❖ Dr.-Pt. relationship.
- ❖ Holistic approach.



# ACCOMMULATION OF HAZARDS

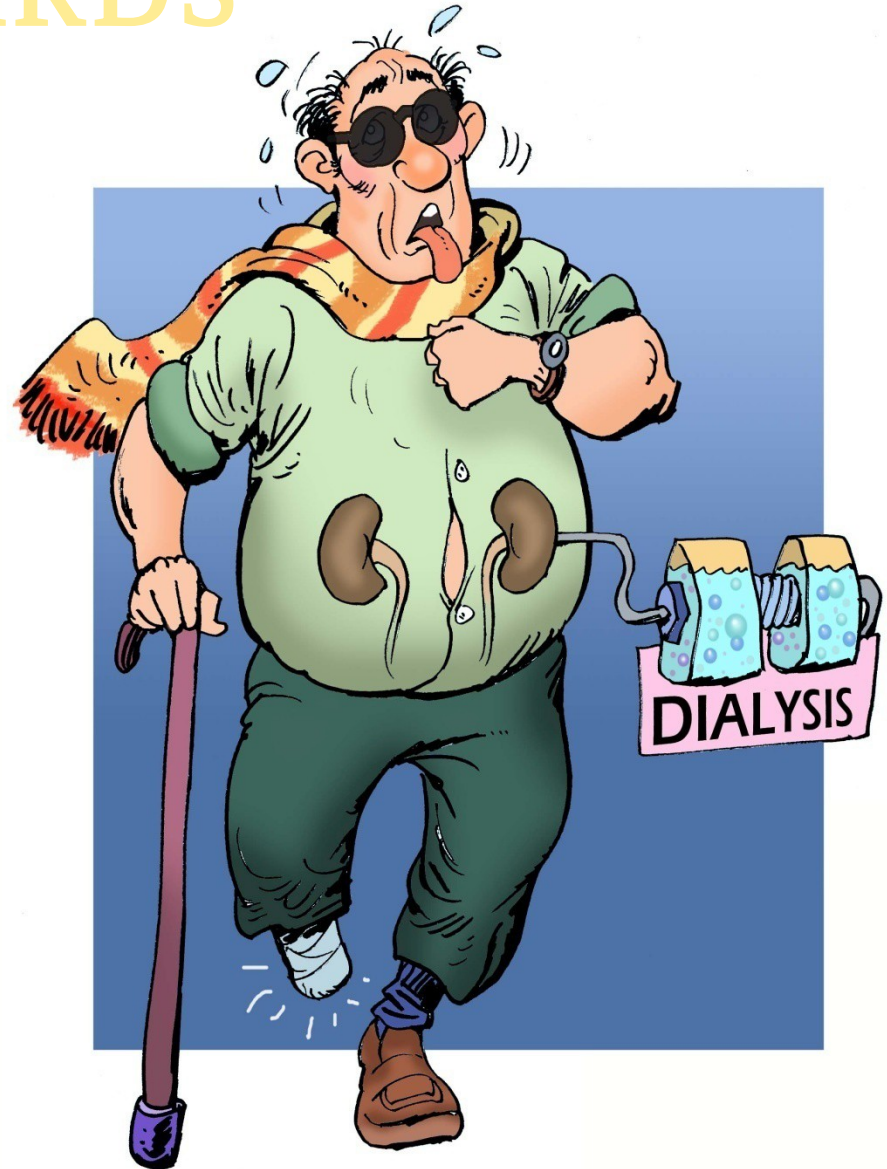
Risk behavior

Unbalanced diet ■

Inactivity ■

Obesity ■

Smoking ■





## Conclusion:

- ❖ Anticipatory care is the integration of prevention and cure.
- ❖ PHC service is the optimal place to apply this care and observe.
- ❖ Every opportunity to be utilize to deliver this care.
- ❖ Case finding V/S formal screening.



# Principles of patient education

# patient education purposes

- Conveying knowledge and understanding
- Creating a different attitude or perspective
- Building skills
- Changing behavior

# Factors to consider

- Patient's and family's beliefs and values
- Their literacy, educational level and language
- Emotional barriers and motivations
- Physical and cognitive limitations
- The financial implications of care choices

# To ensure patient education is effective component of patient care

- Incorporate it into mission and strategic priorities
- Create environment that encourage patient education efforts
- Ensure infrastructure to oversee, provide and support patient education
- Incorporate it policies, procedures and protocol
- Ensure performance improvement address patient education
- Provide necessary resources (staff, training and materials)

# Improving patient education

- Assess educational and clinical needs
- Include in patient education classes
- Skills lab for patient and family
- Individualize printed materials (?culturally sensitive)
- Educational telephone program
- Self-monitoring diaries for self assessment and learning
- Well prescription (behavior, exercise, diet, stress ,reading ect)
- Workshops for staff
- Multidisciplinary pt ed committees + pt +family (needs, design, evaluate )

# Challenges to effective education

- Sensory and physical impairments
- Illiteracy
- Language
- Age
- Social, cultural, spiritual

# The value of patient education :can be summarised as follows

- Improved understanding of condition, diagnosis, disease, disability
- Improved understanding of methods and means to manage multiple aspects of medical condition.
- Improved self advocacy in deciding to act both independently from medical providers and in interdependence with them.
- Increased Compliance .
- Patient Outcomes –respond well to plan – fewer complications.
- Informed Consent.
- Utilization – More effective use of medical services .
- Satisfaction and referrals .
- Risk Management - Lower risk of malpractice when patients have realistic expectations.



# ?What is Health Promotion1

- Concept was first introduced in USA 1979
- Has evolved to include the educational, organizational, procedural, environmental, social, and financial supports that help individuals and groups reduce negative health behaviors and promote positive change among various population groups in a variety of settings

# Successful Health Promotion

- Regular Exercise ■
- Balanced Diet ■
- Ideal Body Weight ■
- No Smoking ■





# Questions



**Thank you**