

Research Progress on Health Management Model of Chronic Diseases

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Keywords: Chronic disease, Health management

Abstract: By using the method of literature review, this paper discusses the research progress of key health management mode of chronic diseases, and summarizes it, so as to provide necessary theoretical support for the colleagues engaged in the research of related fields.

1. Introduction

The progress of population aging not only affects social and economic development, but also brings severe challenges to health care services. At the same time, with the development of social economy and the continuous development of health services, the medical and health conditions have been greatly improved, the birth rate and mortality rate have been rapidly reduced, the population has been rapidly aging, the human disease spectrum has changed dramatically, the acute infectious diseases have been effectively controlled, the chronic diseases have become the primary threat to human health, and they are also the public concern all over the world Health issues. Domestic and international experience shows that one of the effective measures to deal with chronic diseases is to improve people's health education level and health literacy level. It is also advocated internationally that the measure of "prevention first and combination of prevention and treatment" of chronic diseases is to carry out health education and health promotion. In this paper, the research progress of key health management model of chronic diseases at home and abroad is discussed, which provides necessary theoretical support for the colleagues engaged in related fields.

2. Health Management of Chronic Diseases in Japan

Japan has established a mature and perfect social security system with the development of economy and society since 1950s, but chronic diseases are also a major problem in the Japanese medical insurance system, so Japan began to design health examination and health guidance for specific chronic diseases in 2002 and formulated a new health management model for chronic diseases. Japan's health management model of chronic diseases focuses on specific health examination and health care guidance, strengthens the implementation effect of medical insurance institutions in health management, and plays a comprehensive adjustment function of various units and regions. Through statistical analysis, Liu Xiaoli concluded that Japan's chronic disease health management model effectively reduced the incidence of chronic diseases and the risk factors leading to chronic diseases, but also reduced medical costs. According to the results of specific examinations, the specific health care guidance objects in Japan are divided into high-risk groups and low-risk groups, and then specific health guidance is carried out according to the classification of the groups, including the explanation of physical examination reports, life and exercise habits, as well as how to correctly measure blood pressure, blood sugar and other objective indicators, and regularly evaluate the health status of the population. This is similar to the hierarchical management model in China. However, in Japan, the implementers who use the integral system to supervise and

manage the guidance of chronic disease health management divide the overall guidance of chronic disease health into two kinds of plans that must be implemented, each of which has a fixed integral, and the instructors get corresponding integral every time they provide support. If they fail to reach the corresponding integral within a fixed period, severe punishment measures shall be taken. This system urges the implementers of management to actively manage the patients with chronic diseases, which can better ensure the implementation effect of management.

3. Chronic Health Management in the United States

The concept of health management was first put forward by the insurance industry in the United States, and has been deeply rooted in people's minds. In the United States, governments, enterprises and individuals are involved in health management, and many management forms and strategies are increasingly mature. The health management of the whole people is mainly organized by professional health maintenance organizations. There have been health management plans for different groups of people, such as the diabetes disease management project (DDMP), the elderly total care project (PACE), and so on. These management projects have achieved timely and effective results. The practice of these management projects has proved that: through health management can effectively reduce the incidence of disease, and then reduce the national and personal medical expenses, but also improve the quality and efficiency of preventive health care services. Practice in the United States has proved that health management is very effective in improving the health level of the population and reducing the medical cost of the country.

4. Finland's Chronic Disease Management Model

In order to reduce the national medical and health costs and improve the quality of life of the population, Finland also actively explored a new type of chronic disease health management mode through the community health service organization in the 1970s, in order to eliminate the risk factors that lead to the occurrence of chronic diseases from the source. In 1972, North Karelia province of Finland began to implement chronic disease health management. First, establish an appropriate behavioral framework, determine the management objects according to the framework, test their behaviors, and carry out intervention and adjustment measures according to their behaviors; second, focus on the cooperative relationship with the community, and take a variety of intervention methods; third, rely on the faith and willpower of the project team; the last key is to cooperate with the international community and participate in the health management training around the world. The goal is to achieve a win-win result. Finland's health management has proved that the incidence of chronic diseases can be avoided. Through the guidance of experts, the efforts of medical personnel and the joint efforts of the community can greatly reduce the incidence of chronic diseases and improve the health status of the population. After 20 years of practice, Finland has initially formed the basic mode, first of all, the behavior and life style of the population. Through cooperation with the community, the living environment and social environment of the population have been changed, and the "Finnish behavior mode" has been put forward, paying attention to the impact of psychological factors on health; secondly, the detection system of risk factors leading to chronic diseases has been established to prevent and treat chronic diseases. The special group of the disease carries out regular evaluation of management projects and different levels of evaluation for different individuals. Finally, it carries out remote information management to help professional doctors communicate with the population with risk factors.

5. Chronic Disease Health Management in China

The theory and practice of health management of chronic diseases started late in China, about the 1980s and 1990s, so there is still a big gap between China's chronic disease model and foreign countries. So far, there is no perfect and unified theoretical system, and there is no corresponding national standard, professional management personnel and evaluation effect system. In 2005, a new

type of occupational health administrator appeared in China, and then an expert committee of health administrator was established in the following year, and a relatively standardized and perfect theoretical system and rules and regulations were formed. The management mode of chronic diseases can be divided into hierarchical management mode or hierarchical management mode, self-management mode and contractual management mode. The hierarchical management mode first appeared in the health management of hypertension in the 1980s. The process is to divide hypertension into 1, 2 and 3 levels according to the blood pressure value, and then into 1, 2 and 3 levels according to the level. The management contents include health files, health follow-up management, guiding hypertension patients to self detect blood pressure, etc. the management contents of the three levels are the same, but The higher the level, the more frequent the follow-up. Fu Dongbo carried out self-management on 10 hypertensive patients in a street in Shanghai. The main form of management was group class, which included how to exercise correctly, how to eat, how to manage self emotions, etc. after management, he found that the mood, diet, smoking and drinking of hypertensive patients were improved. The contract management mode is to make management plan according to the hypertension prevention and control guidelines. At the same time, the principle of two-way selection is adopted between hypertension patients and community family doctors. After signing the contract, the health management plan will be implemented.

Most of the forms of chronic disease health management in China are based on the foreign chronic disease model as a reference, and have not changed substantially. Therefore, China's chronic disease management model still needs to be improved and improved, and it is mainly aimed at common chronic diseases such as diabetes and hypertension, with narrow management. The initiative recommended by the World Health Organization to control chronic diseases is community health service, but it does not play a significant role in promoting the health of patients with chronic diseases. The reasons for the phenomenon include: People's inherent health concept and lifestyle; the community health service system is not perfect enough to fully meet the needs of the market; the government's investment in chronic disease health management is insufficient, leading to the development of health management is limited, etc.

Acknowledgment

General program of NSFC (71673309); Key technologies related to major disease prevention and control supported by special fund for science and technology development of Guangdong Province (2016A020216006).

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