Dr. Bruce Struminger summed up the feeling in the room at CSG’s recent Chronic Disease Policy Academy in Kansas City, Mo., this way: “Chronic disease management is a team sport,” he said, adding it’s important to make sure all the players are at the table.

Struminger is a medical officer with the Indian Health Services, working at Four Corners Regional Health Center in Arizona. Four Corners works primarily with residents of the Navajo Nation, whose land is located where Arizona, Colorado, New Mexico and Utah meet. Struminger’s story starts with a problem doctors were having in New Mexico.

“One-and-a-half percent of the population in New Mexico was infected” with hepatitis C, he said. “In 2004, less than 5 percent had been treated. Also, about half of the prisoners in the state were infected with hepatitis C. That’s probably not too far off from statistics in other states.”

Without treatment, hepatitis C can be fatal. In fact, New Mexico has the highest rates of chronic liver disease and deaths due to cirrhosis in the nation, 25 percent higher than any other state, Struminger said. The problem was that 30,000 patients with hepatitis C lived in New Mexico, but only five liver doctors practiced there.

In stepped Dr. Sanjeev Arora, a professor of medicine at the University of New Mexico and director of Project ECHO—Extension for Community Healthcare Outcomes.

“His solution was, let’s see if we can train primary care doctors spread throughout the state to become local experts in assessing and treating viral hepatitis,” Struminger said.

Doctors meet on a weekly interactive videoconference and discuss patient cases, get help on tricky cases and learn the latest in treatment options from a group of experts at the university. The project helps ensure hepatitis C patients from across New Mexico get the highest standard of care and it also helps doctors expand their knowledge and gain continuing education credits. The idea is being replicated at several sites across the country, and even internationally, and has been expanded to include conditions such as HIV, chronic pain, diabetes, cardiovascular problems and patients with complex chronic conditions.

“Medical knowledge has exponentially increased over the last 30, 40, 50 years,” Struminger said. “Individual doctors have limited hours to keep up with all the journals. It’s very difficult to stay on the cutting edge of literature for treating complex diseases. Things like hepatitis C, a huge amount of research and knowledge has been developing over the past 10 years. For the nonspecialist to keep up
with that can be very challenging.”

Janet Collins, director of the Division of Nutrition, Physical Activity and Obesity at the Centers for Disease Control and Prevention, said cooperation also will be needed to solve such complex issues as diabetes, obesity and tobacco use.

“Nearly half of Americans today are living with one chronic disease, if not multiple,” Collins said. “Forty-four percent, that’s 128 million folks. ... These are problems that are hitting the population at very large numbers and suggest we need to do something upstream to maintain the good health we’re born with.”

Collins said chronic diseases are not limited to just health and human services committees.

“We’re probably not going to solve these problems in the health sector alone,” she said. “If we’re talking about wanting to improve nutrition, increase physical activity, probably pretty quickly we’re talking about transportation issues, built environment issues, agriculture issues, marketing issues. ... Involving these other sectors—housing, planning, education—are incredibly important.”

Paula Clayton, Kansas’s director of the Bureau of Health Promotion and board member of the National Association of Chronic Disease Directors, said the problem states are facing is not small. Since 1980, adult obesity has doubled and childhood obesity has tripled.

“In today’s economically challenging times, investment in disease prevention makes even more sense than ever before,” Clayton said. “Here’s the good news. The vast majority of cases of chronic disease could be prevented or managed. We find most chronic diseases could be prevented by focusing on three things: stop smoking, eat healthy and get more physical exercise.”

Partnerships, Clayton stressed, are important.

“As we deal with chronic diseases, we find how critically important it is to work in partnerships with other organizations and parties across the state,” she said. “Every state has a chronic disease director, so use them. If you don’t know them, reach out and ask for help.”

---

Also in this issue:

- Tips to Lower Costs of Chronic Diseases [3]
- Entrepreneurs are the Future of State Job Growth [5]
- Technology Taking Education to New Heights [6]

Tags:
- 2013 CSG National Conference [7]
- E-Newsletter [8]
- Policy Area [9]
- Health [10]
- Chronic Diseases [12]
- Content Type [13]
- Publications [14]