

中文題目：高血壓、糖尿病、高血脂及腦中風病人的整合照護療效

英文題目：The Clinical Effect of Integrated Care of patients with hypertension, diabetes, and hyperlipidemia and stroke

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Background: To identify and approach hypertension, diabetes and lipid disorder at earlier stage with an integrated disease management is a very important issue for a successful prevention of future target organs damage and vascular events, including stroke, myocardial infarction and chronic renal failure etc. The author put effort on the integrated disease management of hypertension, diabetes, and lipid disorder and stroke patients for many years, and conducted a retrospective study for a consecutive 5 years to study the clinical effect and outcome of these patients.

Materials and Methods: This study included a total of 2425 outpatients in a regional teaching hospital in south Taiwan in 2005, with at least one diagnostic ICD-9 code of hypertension, diabetes, hyperlipidemia or stroke, tracing down to 2010, which was separated in two groups, integrated care group (IC group, n=1226) and usual care group (UC group, n=1199). The integrated care group implemented an integrated disease management on hypertension, diabetes, and hyperlipidemia continuously from 2005 to 2010, advocating on health education including the importance of diet and body weight control and exercise, the target value of blood profiles of disease control, and how to prevent the development or progression of atherosclerosis. Usual care group was the patients following up at other physicians' clinics with same specialty. Estimation of blood HbA1c and lipid profiles and creatinine was compared in the two groups with a trend analysis.

Result: There is no significant difference in age, gender, mean HbA1c, total cholesterol (TC), triglyceride (TG), HDL, and LDL in both groups. The blood HbA1c and lipid profiles control was better in the integrated care group (in 2010, IC group: HbA1c 6.53±0.91%, TC 166.51±26.11 mg/dL, HDL 47.68±12.26 mg/dL, LDL 89.56±19.09 mg/dL; UC group: HbA1c 7.19±1.45%, TC 179.89±33.95 mg/dL, HDL 44.45±9.99 mg/dL, LDL 100.78±28.59 mg/dL) with statistical significance (for

HbA1c, TC, LDL, $P < 0.001$, HDL, $P = 0.001$). Serum creatinine in IC group was 1.16 ± 0.73 mg/dL, UC group was 1.27 ± 0.95 mg/dL, $P = 0.112$. There's a trend of annual reduction of HbA1c and TC, TG, LDL in both groups from 2005 to 2010, with a greater tendency in IC group.

Conclusion: In this study, there's significant benefit in the disease control in IC group (in HbA1c, TC, TG, HDL, LDL). Although there's no significant difference in some variances, but from the viewpoint of patient-centered healthcare emphasized nowadays, integrated disease management of IC group would be a better choice. This research may provide a reference healthcare model in the "integrated care program" promoted by National Health Institute in Taiwan.