# What are the most valued patient outcomes regarding medical care for French patients with obesity?

# Results from an online patient community (carenity.com)

Debroucker Frédérique<sup>1</sup>, Fayet Emmanuel<sup>1</sup>, Ullmann Eugénie<sup>2</sup> <sup>1</sup>Medtronic, 92100 Boulogne-Billancourt, France <sup>2</sup>Carenity, 75008 Paris, France

Poster PSY199

# **BACKGROUND AND OBJECTIVES**

### Background

- Obesity affected approximately 6.9 million of French adults in 2012.<sup>1</sup>
- The ageing population and financial constraints have put a great strain on the French healthcare system. Value-based healthcare (VBHC) is emerging as a possible solution to build a more efficient healthcare system.

#### **Objectives**

- To define and rank the most valued outcomes in medical care for patients affected by obesity.
- To better understand patients' expectations for healthcare organizations and patient support services.

## **METHODS**

#### Carenity platform

 CARENITY is an international online patient community devoted to people with chronic diseases. It allows patients and caregivers to share their experiences, to access medical information and to participate in online surveys, generating real-world patient insights.

#### Study design

- The online survey submitted to CARENITY's members has previously been set up by CARENITY.
- The questionnaire has been approved by one patient with obesity.
- This cross-sectional study was conducted from January to February 2018. French adult patients affected by obesity and registered on Carenity website were invited to respond to an online confidential survey of 37 questions about obesity.
- A matrix was created to explain the most important expectations and least satisfactory aspects of medical care for patients affected by obesity:

Priority 1: low satisfaction and high importance criteria Priority 2: low satisfaction and low importance criteria Priority 3: high satisfaction and high importance criteria Priority 4: high satisfaction and low importance criteria

# RESULTS

31-40 y.o

41-50 y.o

51-60 y.o

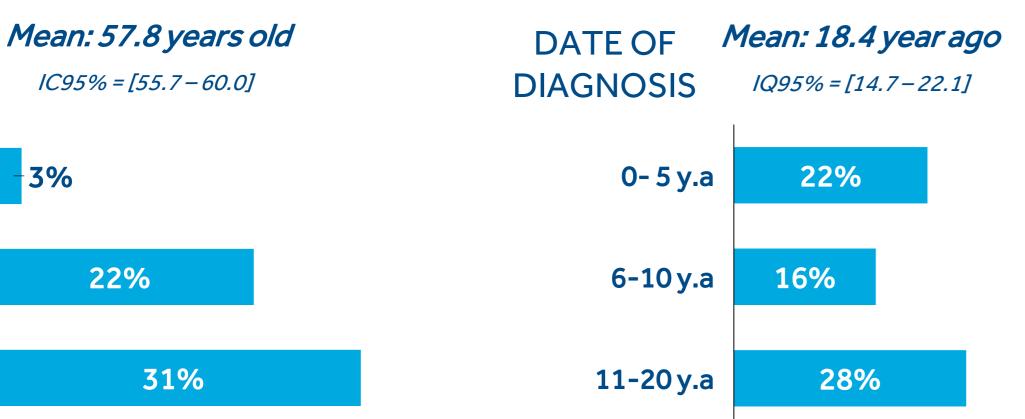
61-70 y.o



-3%

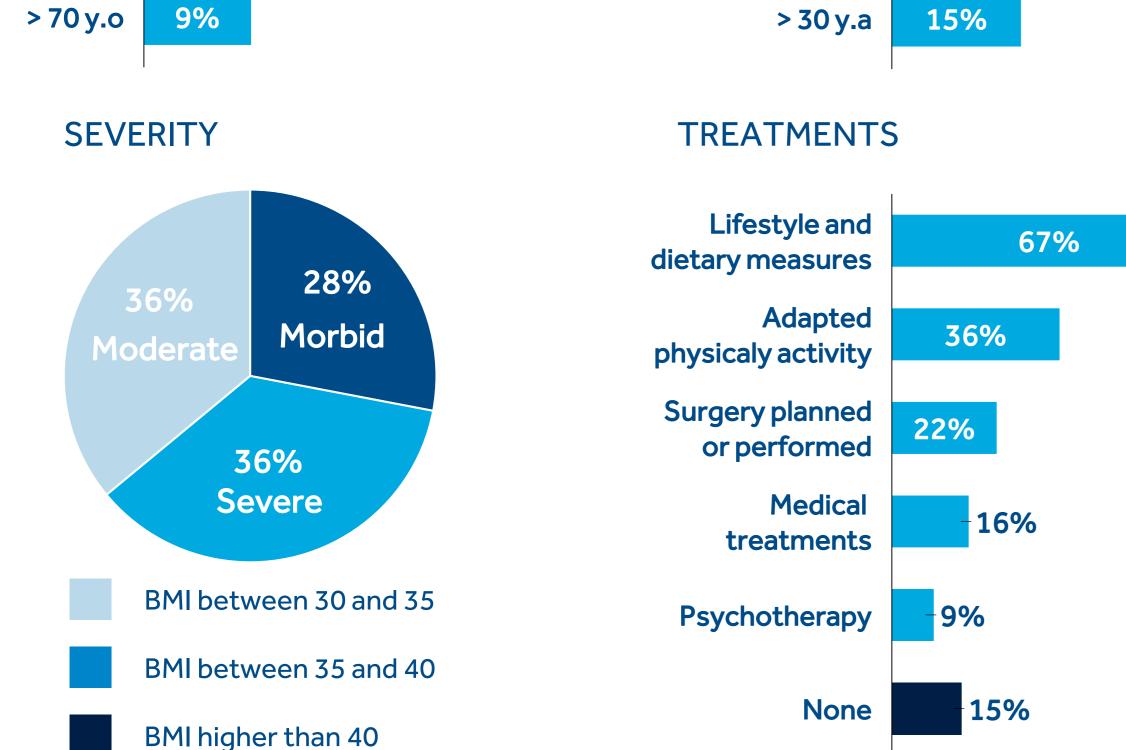
22%

35%

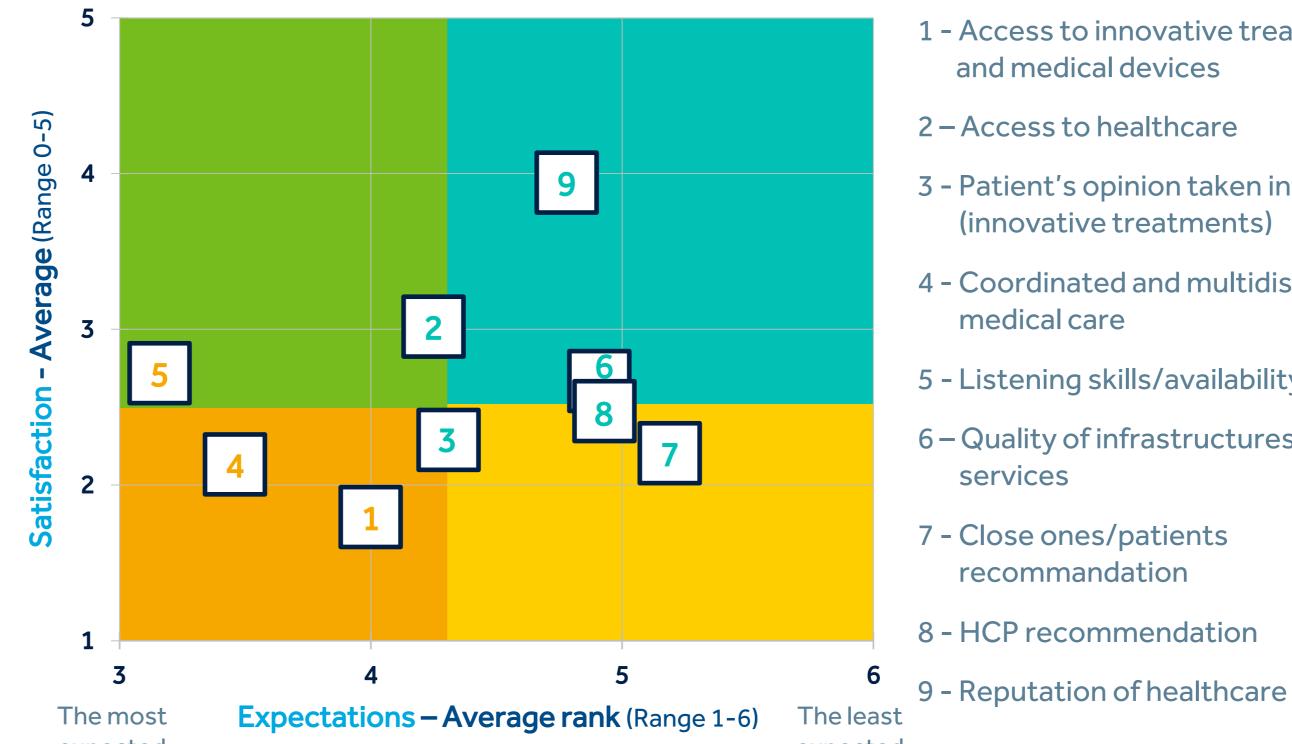


21-30 y.a

19%



#### 2/ SATISFACTION AND PATIENTS' EXPECTATIONS WITH MEDICAL CARE



- 1 Access to innovative treatments and medical devices
- 2 Access to healthcare
- 3 Patient's opinion taken into account (innovative treatments)
- 4 Coordinated and multidisciplinary medical care
- 5 Listening skills/availability
- 6 Quality of infrastructures and services
- 7 Close ones/patients recommandation
- 8 HCP recommendation
- **36%** of patients have given 0/5 about their surgical intervention follow-up (mean: 1.6/5).
- Only 28% of patients were involved in therapeutic patient education (TPE).
- About 50% of them are unsatisfied with TPE (mark less or equal to 2/5; mean: 2.3/5).

# THE MOST EXPECTED ELEMENT IS: LISTENING SKILLS/AVAILABILITY



AVAILABILITY

# 3/ SATISFACTION AND PATIENTS' EXPECTATIONS WITH INFORMATION AND SERVICES

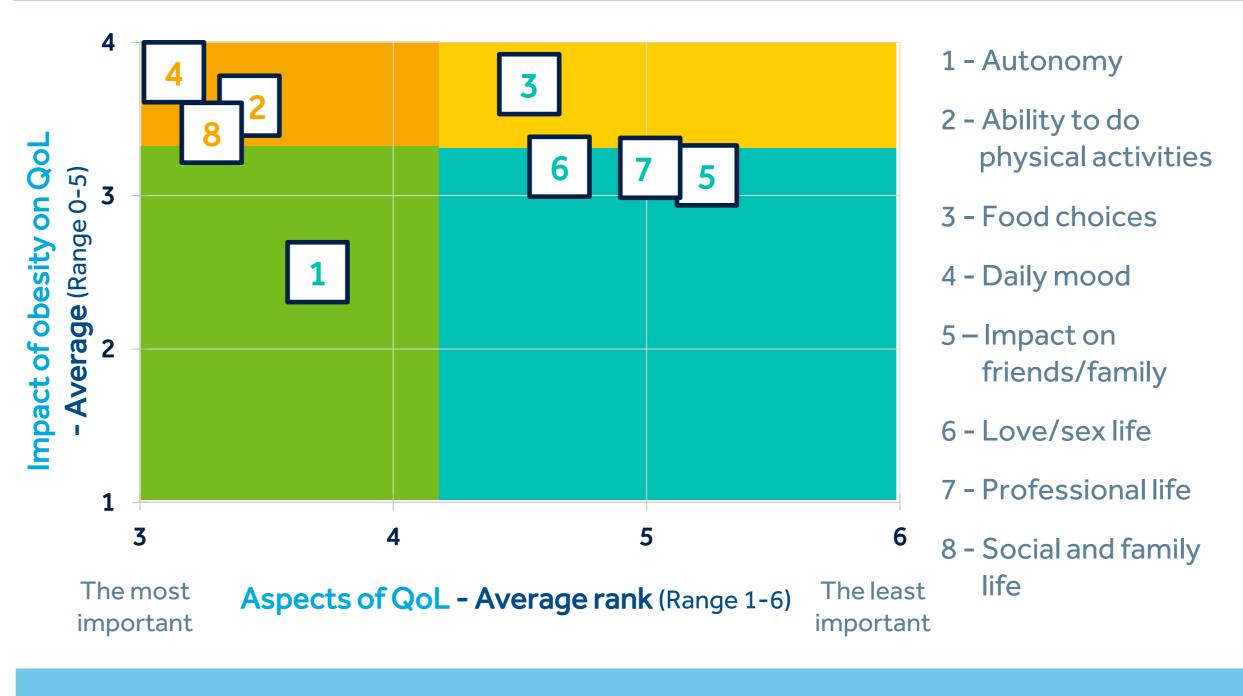


Expectations - Average rank (Range 1-6) support expected expected HE LEAST SATISFACTORY **SERVICES ARE:** LIFESTYLE AND DIETARY **PSYCHOLOGICAL SUPPORT** and **MEASURES** 

(the 5 least available) The least available 63% **Telemedicine** Connected 69% devices Connected 69% medical devices **Psychological** 81% support Websites / 84% The most mobile apps available

4/INFORMATION AND SERVICES'

### 5/IMPACT OF OBESITY ON QUALITY OF LIFE (QOL)



THE THREE MOST VALUABLE FACTORS THAT IMPACT THE QUALITY OF LIFE OF PATIENTS AFFECTED BY OBESITY ARE: DAILY MOOD and PHYSICAL ACTIVITIES

and

SOCIAL AND FAMILY LIFE

# **CONCLUSION AND PERSPECTIVES**

- Access to coordinated and multidisciplinary medical care is one of the most valuable, yet least satisfactory, element.
- Lifestyle and dietary measures should be developed because they are highly expected and moderately satisfactory.
- Psychological support needs to increase as daily mood is the most important aspect of patients' lives impacted by obesity.

Coordinated and multidisciplinary medical care should be developed for patients with obesity and should include dietary measures and psychological support.

Coordinated and multidisciplinary medical care may improve daily mood for patients with obesity.

<sup>1</sup>. Inserm/Kantar Health/Roche. ObÉpi 2012. Enquête épidémiologique nationale sur le surpoids et l'obésité. 2012. Available at: http://www.roche.fr/innovation-recherche-medicale/decouvertescientifique-medicale/cardio-metabolisme/enquete-nationaleobepi-2012.html







