

#### **OP43.4**

#### **How do general practitioners assess self-care in patients with multimorbidity and difficulties in disease management?**

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**Background and Aim:** Disease Management Programs (DMPs) have been developed for the major chronic diseases in Denmark. A cornerstone of the DMPs is stratification of the patients upon disease complexity and self-care ability. It is mostly performed by the patient's General Practitioner (GP), who thereby determines how and where the treatment should take place. There is only sparse knowledge about the GPs perceptions and assessment of self-care according to the DMPs and how it is managed in patients with multimorbidity.

The aim of the study is to explore GPs' perceptions of and experiences with assessment of self-care ability in patients with multimorbidity and difficulties in disease management in relation to stratification.

**Method:** 12 GPs were individually interviewed regarding their experiences with assessment of self-care ability in patients with multimorbidity. A semi-structured guide was used and followed by data driven analyses.

**Results:** Preliminary results point towards that GPs understand health-related self-care ability as patients' recognition of their health problems and the willingness to put time and effort in adjusting their lives to their disease. The GPs stress that health-related self-care ability depends upon the patients' overall circumstances such as:

- 1) Other somatic conditions,
- 2) Mental disorders,
- 3) Few mental resources,
- 4) The current social situation.

**Conclusions:** This study formulates GPs' specific understanding of self-care which can be a starting point for a more professional work with self-care in General Practice.

**Points for Discussion:** How should GPs assess self-care in patients with multimorbidity and low ability of self-care? What could primary caregivers do to improve disease management in patients with multimorbidity and low self-care?