

High-value, data-informed, and team-based care for multimorbidity

In most settings, care is traditionally physician-centred, but trends are shifting towards a patient-centred health-care system.¹ Patient-centred care focuses on the health-care needs and preferences of patients, by allowing patients to become active participants and ensuring that their values guide clinical decisions.¹ Jonathan Pearson-Stuttard and colleagues² called for a patient-centred approach of multimorbidity in the previous issue of *The Lancet Public Health*. However, we would like to stress that for such an approach to be truly implemented, health-care systems must be designed for the provision of high-value, data-informed, and team-based care.

Firstly, the promotion of high-value care is needed for the long-term sustainability of health-care systems. Value-based health care aims to increase the value that is derived from the resources available for a population.³ Overdiagnosis, overtreatment, and more subtle forms of low-value care and waste are recognised as major threats. However, one major challenge is distinguishing high-value care from low-value care; a hierarchy of evidence-based recommendations needs to be generated through health technological assessments that integrate patients' preferences.

Secondly, the management of multimorbidity should be transformed through data-informed care. Care for multimorbidity is complex, calling for monitoring at the individual level with new health information technology, including through a better use of electronic health records. A surveillance system is also needed at the population level, and we agree with Pearson-Stuttard and colleagues that existing disease surveillance

systems have not been used optimally to guide effective action for the management of multimorbidity. The digital transformation of health-care systems will help to improve health surveillance, but these systems have to use data effectively to avoid being "data rich but information poor".⁴

Thirdly, team-based care is needed for the integrated and coordinated management of chronic diseases and multimorbidity. Although several types of team-based intervention exist for the management of chronic diseases, such as diabetes or hypertension,⁵ studies are now needed to evaluate how team-based care can help manage multimorbidity within a patient-centred approach. Digital transformation of health care can also offer opportunities to ease the implementation of team-based care through information systems leveraging data from shared electronic health records.

In conclusion, we agree with Pearson-Stuttard and colleagues that several challenges need to be addressed to work towards the provision of high-value, data-informed, team-based, and patient-centred care of multimorbidity; overcoming these challenges will be necessary for the long-term sustainability of health-care systems in aging populations.

We declare no competing interests.

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