

## Same Room, Different Ailments

A program in which patients with varied problems help each other expands nationwide

By ANNE TERGESEN

After quintuple bypass surgery in 2005, Howard Falvey, now 64 years old, says his doctors warned him to improve his diet and exercise habits. But it wasn't until 2010, when the Woodland, Calif., resident enrolled in a program led by others with chronic health problems, which he began to follow his doctors' advice.

"I learned to take charge of my own health," says Mr. Falvey, the former owner of a printing and graphics company. Now 60 pounds lighter, Mr. Falvey uses diet and exercise, rather than medication, to control his type 2 diabetes. "A doctor can't do that for you."

Mr. Falvey is part of the Chronic Disease Self-Management Program, an initiative that started in the early 1990s at Stanford University and now has gone national; thanks to recent grants to various sponsors of the program from private foundations and \$37 million in federal funds over the past three years.

**LEARNING FROM OTHERS** A chronic-disease self-management workshop at Santa Clara Valley Medical Center, San Jose, Calif.

### Voice of Experience

Now available in virtually every state, the six-week, 15-hour program is generally offered at little to no cost by a growing number of government agencies, nonprofits, hospitals and insurers. The workshops combine group discussions and activities with short lectures on topics including eating healthy, managing medication and using distraction techniques to manage pain.

But unlike most programs aimed at helping patients with chronic illnesses better manage symptoms and treatments, this one is mainly led by former participants themselves, who thus are also patients and have a close understanding of the challenges involved. The leaders are trained in a four-day course.

"It can be very motivating for a group to be facilitated by someone for whom the program has been life-changing," says Jay Greenberg, senior vice president for social enterprise at the National Council on Aging in Washington.

### Something in Common

The program also puts people with different ailments in the same room, where they can talk to and learn from each other. Kate Lorig, founder of the program and a professor emerita at Stanford University School of Medicine, in Palo Alto, Calif., says that patients who have different conditions often face similar problems—including depression, pain and how Shawn Smith, a group leader from Olympia, Wash., says participants in his workshops already know a lot of the information that's being taught. But "we motivate them to actually do it," he says.

The program's popularity dovetails with efforts to overhaul health care by placing a greater emphasis on preventing problems. There is also growing recognition that with training, patients themselves can do more to manage the chronic conditions that affect about 90% of adults age 65 and older.

"When it comes to chronic care, in order for treatment to work, the patient needs to become very active in managing his or her health," says Mr. Greenberg.

To find a workshop, or access the free online version of the program developed by the National Council on Aging, go to [restartliving.org](http://restartliving.org). In several states, the program goes by different names.

## Better Health

Many studies indicate the program can improve patient health, says Teresa Brady, a senior behavioral scientist at the Centers for Disease Control and Prevention in Atlanta. Some have also documented reductions in hospital and emergency-room admissions.

Mr. Smith, for his part, was diagnosed with interstitial lung disease a decade ago. The 41-year-old says that like many with incurable conditions, he was overwhelmed at first.

"I had to quit my job and was told I'd have to have a lung transplant." He says the program taught him "how to break down overwhelming challenges into little steps to better manage my condition."

To that end, each participant in the workshops sets one goal every week. Says Mr. Smith, "If they are going to walk, they need to say when and for how long."

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## Chronic Conditions by the Numbers

**1.7**

Number of Americans,  
in millions, who die of a  
chronic disease each year.

.....

**91**

Percentage of older  
adults who have at least  
one chronic condition.

.....

**73**

Percentage of older  
adults with at least two  
chronic conditions.

.....

**67**

Percentage of Medicare  
spending that goes to  
beneficiaries with five or  
more chronic conditions.

.....

**5**

The chronic conditions—  
diabetes, arthritis, kidney  
disease, hypertension and  
mental disorders—that account  
for one-third of the growth in  
Medicare spending.

.....

**3**

The risk factors—  
poor diet, inactivity  
and smoking—  
that, if eliminated would  
prevent 80% of heart disease  
and stroke,  
80% of type 2 diabetes  
and 40% of cancer.

Source: National Council on Aging  
The Wall Street Journal