

Dr. Harris requests feedback from Seminar participants on a proposal to evaluate the usefulness of an e-health intervention designed to engage patients in self-care for their diabetes and other cardiovascular risk factors, described briefly below.

Evaluation of an E-Health Intervention in Diabetes

Can an existing Internet tool based on an organization's electronic medical record (EMR) serve as a surrogate for labor intensive manual interventions to improve compliance and outcomes for patients with the chronic disease of diabetes? Secondly, can the patients who are likely to be more successful using this intervention be predicted based on predisposition to adopt technology?

The Cleveland Clinic has an EMR with over 2.2 million patients in the system, and 7,897 diabetics were seen in 12 locations over a 6-month period. We have already piloted a web-based support tool and are at the point of institution wide deployment. The tool enables diabetic patients to review their vital signs, test results, diabetic management guidelines, and enter finger stick glucose values.

We will use an experimental design to compare compliance behavior and outcomes of a treatment cohort that will be provided access to the technology in addition to medical standard of care. The control group will receive only standard of care. We will also evaluate participants' predisposition to adopt technology and determine the relationship of predisposition to compliance and outcomes.

The potential benefit to society would be a reduction in utilization of healthcare resources over time leading to lower costs for the management of this chronic disease.

This study should foster an understanding of how e-health technology could be most effectively deployed based on patient characteristics.