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FROM THE EDITOR

Special Issue: Chronic Illness Care

**You need teamwork, data and a new approach
to involving your patients.**

As you'll see, the focus of this issue, as with much of what *FPM* publishes, is not so much patient care per se but systematizing care – helping family physicians provide care that is consistent, reliable and as good as it can get. Yes, you already take good care of your patients with chronic illnesses, but we've heard enough reports from physicians who have gathered data on their practices to be pretty sure of one thing: If you don't have fairly good data on your population of patients with chronic diseases, you probably think you do a better job than you actually do.

Three factors that have been shown to be keys to better chronic disease care are teamwork, population-based care and patient involvement. Those are the factors that inform this issue.

Team care comes hard to many physicians, involving as it does a set of assumptions and a self-image antithetical to those they may have absorbed from their entire professional experience. Consider that team formation requires a leader willing to confess weakness and areas of ignorance. That alone can be a large hurdle. Two articles in this issue deal with team care: Anton Kuzel, MD, MHPE, addresses the challenges of forming a care team (page 15), while Robert Lyon, MD, and James Slawson, MD, show how a care team works in practice (page 27).

Population-based care suffers from its name, which suggests public health more than medicine, but if you can get past the term and understand what a chronic disease registry can do for your practice – how it can help you improve your care of a population by improving your care of patients one by one – the value of the approach is clear. Bruce Bagley, MD, and Jason Mitchell, MD, show you how to get started with a registry, the primary tool of population-based care (page 11).

Patient involvement has long been a challenge. Somehow noncompliance seems more the typical mode of patient behavior than active participation in care. Motivational interviewing, however, turns the compliance issue on its head by inviting patients to choose their own goals. Elizabeth Stewart, PhD, and Chester Fox, MD, explain how to get the patient and you on the same team (page 21).

I hope you find something in this issue to take your chronic illness care one step closer to as good as it can get.



Robert Edsall, Editor-in-Chief

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