Recommendations for action from the DiPaH project

Digital prevention in hypertension care

The prevention of cardiovascular disease is a central concern of healthcare research - not least because high blood pressure remains one of the leading causes of morbidity and mortality in Germany, despite being easily treatable. Gaps in care are particularly evident among older people and in rural regions. Digital health technologies, from health apps to online courses, promise a low-threshold supplement to traditional prevention. In practice, however, their reach, acceptance and effectiveness often fall short of expectations. Against this backdrop, the DiPaH - Digital Prevention Measures for Arterial Hypertension project, funded by the Innovation Committee of the Joint Federal Committee, investigated how digital health technologies can be integrated into healthcare in a targeted manner - with a particular focus on age-specific and regional differences.

>> The project pursued a mixed-methods approach. Qualitative interviews and questionnaire surveys were conducted with AOK Nordost policyholders, users of online prevention courses and users of a hypertension app as well as GPs and cardiologists, supplemented by focus groups with stakeholders. In addition, routine data from AOK Nordost was merged with the data from the questionnaire surveys of the insured persons and analysed. The results were discussed in collaborative workshops and recommendations for action for healthcare practice were jointly developed.

The central questions of the project were:

- Which population groups can be reached with digital prevention programmes - and which cannot?
- What structural, individual and technical barriers exist to their use?
- How do needs and preferences differ depending on age group and type of residence (urban vs. rural)?

Results and findings

The analysis showed that digital prevention services are currently only actively used by a small proportion of patients with hypertension. Older people in particular have a significantly lower level of digitalisation and health literacy and use digital health technologies less frequently. Systemic barriers were also revealed: Digital health technologies are often not integrated into existing care pathways. There is a lack of recognised quality criteria and visible guidance for patients and service providers. Technological challenges posed by different systems and interfaces are still key challenges that need to be overcome. At the same time, favourable factors have also been identified: A targeted medical recommendation, low-threshold access options, clear communication of benefits and embedding in existing living environments can significantly increase the acceptance and use of digital services.

Recommendations for practice

Based on the findings, the consortium has developed a white paper with specific recommendations for action for stakeholders in the healthcare sector and in politics.

The key recommendations are: Target group-orientated development and approach: Digital prevention services should be geared towards the needs of specific population groups - especially older people.

This also includes offers in simple language, barrier-free design and personalised support structures. Promoting digital health literacy: Prevention must take digital empowerment into account. Educational and support services at local level (e.g. via health pilots) should be expanded. Integration into standard care: Digital services should be more closely integrated into traditional care pathways, e.g. via prescribability, interfaces to electronic patient records and an activating role for GPs. Quality development and assurance: The development of standardised, evidence-based criteria for digital prevention can provide guidance for service providers and insured persons.

The DiPaH innovation fund project makes an important contribution to understanding the prerequisites for digital prevention in the context of hypertension care. The study



Fig. 1: Presentation of the white paper 'Digital prevention approaches in hypertension care'.

Zitationshinweis

Bruch et al.: „Digitale Prävention in der Hypertonieversorgung: Handlungsempfehlungen aus dem Projekt DiPaH", in „Monitor Versorgungsforschung" (03/25), S. 38–39. http://doi.org/10.24945/MVF.03.25.1866-0533.2719

makes it clear that digital services only realise their potential when they are specifically tailored to the needs and realities of users' lives and integrated into existing care structures. The project is an example of how recommendations for action from research and practice can be jointly developed and disseminated - an approach that can be transferred to other chronic diseases. The challenge now lies in operationalising the formulated recommendations in concrete care pathways and securing them structurally. <<

by:
Dunja Bruch MSc[1]
(ORCID: 0000-0002-9511-8487)
Dr. rer. medic. Felix Mühlensiepen, PhD, MPH[2]
(ORCID: 0000-0001-8571-7286)
Susann May MPH[2]
(ORCID: 0000-0003-3847-4861)
Prof. Dr. med. Sebastian Spethmann[3]
(ORCID: 0000-0003-0987-8007)

1: Department of Cardiovascular Surgery, Heart Centre Brandenburg, Brandenburg Medical School Theodor Fontane, Bernau bei Berlin
2: Centre for Health Services Research, Brandenburg Medical School Theodor Fontane
3: Clinic for Cardiology, Angiology and Intensive Care Medicine, German Heart Centre of the Charité, Berlin

Links
The white paper with all recommendations can be accessed via the following link:
https://t1p.de/i07h8

Further information on the project:
www.mhb-fontane.de/dipah

MHB bids farewell to Prof Edmund Neugebauer



Fig. 1: Farewell symposium of the MHB for Prof Neugebauer (Photo: Stephanie Timm).

>> Prof Dr Edmund Neugebauer, Past President and Senior Professor of Health Services Research at the MHB, was bid farewell at the beginning of April this year at a scientific symposium attended by around 50 colleagues, companions and friends.

Edmund Neugebauer is considered a pioneer in terms of content and one of the most influential and important healthcare researchers of his generation. He published more than 1,000 scientific articles, over 600 of which were original works, and wrote and edited numerous books that not only addressed the scientific community, but also attracted attention as a source of knowledge, guidance and inspiration for decision-makers in the public healthcare system and in politics. He was co-founder and long-standing chairman of the German Network for Health Services Research and is the editor of two key textbooks on health services research. In 2016, he was initially elected Dean and Academic Director of the MHB. With the growth of the MHB and the establishment of further faculties, he was elected President of the MHB by the Senate in 2019. He was then Senior Professor of Health Services Research at the MHB from 2022 until today.

'Prof. Neugebauer's research achievements are internationally recognised and have also had a major influence on the development of the MHB. The MHB owes a great deal to Edmund Neugebauer and would not be in the position it is today without him and his tireless commitment. Prof Edmund Neugebauer has played a key role in shaping the profile of research at the MHB. It is no coincidence that the MHB has a research focus on healthcare research. The establishment of research centres and interdisciplinary integrated working groups is largely due to his initiative. The fact that we are able to meet here in Rüdersdorf today is primarily due to the fact that we have established a Centre for Health Services Research here, which forms an interdisciplinary and translational platform for the exchange of scientists and which contributes significantly to the visibility of health services research at the MHB. We also have Edmund Neugebauer's perseverance and personal commitment to thank for the launch of the unique Master's degree programme in Health Services Research. These are all great successes and achievements of the MHB that would not have been possible without the work of Edmund Neugebauer,' said Prof Dr Hans-Uwe Simon, current President of the MHB and Prof Neugebauer's successor in this office, in his laudatory speech.

Numerous companions and colleagues - including the current and former chairwomen of the German Network for Health Services Research - were present to review individual stages of his extensive work and activities in and between health, science and society and to honour his remarkable life's work overall.n. <<

Link:
1: https://t1p.de/jgb98