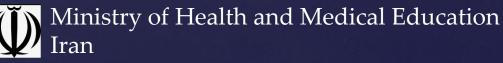
What is Quaternary prevention?

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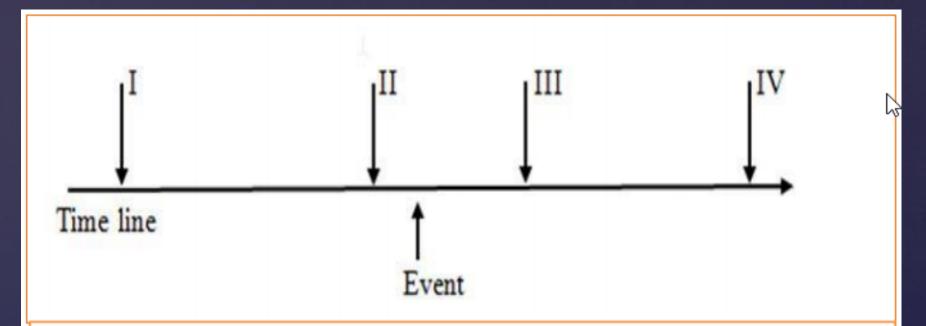


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CLINICAL PREVENTION

Action to avoid occurrence or development of a health problem and/or its complications.

Usual chronological presentation / disease centered / Syphilis like

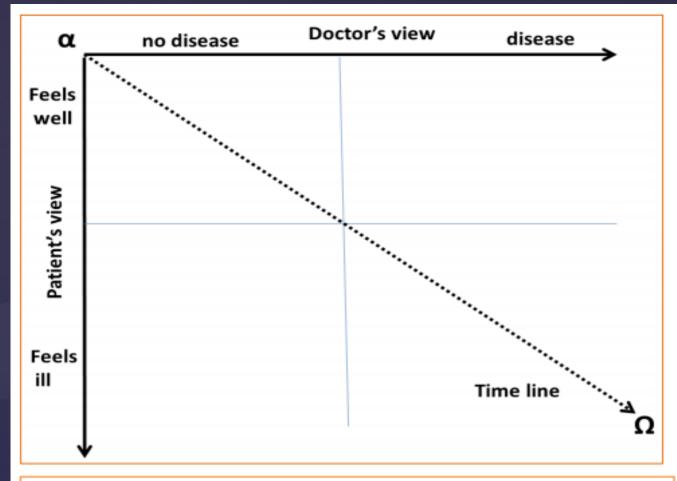


Traditionally, clinical prevention is conceptualized as a medical activity before or after the occurrence of a condition. Primary prevention is used before any problem arises and encompass health education and promotion. The place of secondary prevention is unclear, sometimes used by cardiologists as prevention after an event. Tertiary is not really in use and quaternary has been proposed for palliative care. In this view, the patient is the object of care along time line. The condition is central.

Relational presentation

Patient based

Time line is now oblique



In this model, built on the 2x2 crosstab model, prevention is presented as the result of the relationships between patient and doctor. The doctor is looking for disease while the patient will feel sick one day. The 2x2 crosstab model allows representing 4 fields of activities along the time line which includes traditional preventive ones. In this view, time line cross the two folds table. Working along the time line, called also prevention, is the bread and butter of family doctor along the life of the patients and patients and doctors will meet at the end, suffering and dying together (point Ω)

patient's view

Doctor's view



ntervention before disease

- Health Information
- Immunisation
- · Genetic counseling
- · Diminishing incidence



Avoiding false positive

- Avoiding overmedicalisation
- Avoiding avoidable care
- · Protecting the patient



Avoiding false negative

- Early diagnostic
- Screening
- Diminishing prevalence



Cure & preventing complications

- Acute & chronic care
- Preventing complications
- Rehabilitation
- · Palliative care

Presented at Hong Kong Wonca world 1995, the 2x2 crosstab model, built on the patient doctor relationships, allows to define four fields of activities in GP/FM including also preventive activities along the time line.

Doctor's view

Primary (prevention)

Action taken to avoid or remove the cause of a health problem in an individual or a population before it arises. Includes health promotion and specific protection (e.g. immunisation).



Avoiding false positive

- Avoiding overmedicalisation
- Avoiding avoidable care
- · Protecting the patient

Secondary (prevention)

Action taken to detect a health problem at an early stage in an individual or a population, thereby facilitating cure, or reducing or preventing it spreading or its long-term effects (e.g. methods, screening, case finding and early diagnosis).

Tertiary (prevention)

Action taken to reduce the chronic effects of a health problem in an individual or a population by ininimising the functional impairment consequent to the acute or chronic health problem (e.g. prevent complications of diabetes). Includes rehabilitation.

The 3 definitions of Primary, Secondary and Tertiary prevention already published in 1995 in the Wonca glossary of GP/FM fit perfectly in the 2x2 crosstab model.

Doctor's view

Primary (prevention)

Action taken to avoid or remove the cause of a health problem in an individual or a population before it arises. Includes health promotion and specific protection (e.g. immunisation).

Quaternary (prevention)

Action taken to identify a patient or a population at risk of overmedicalisation, to protect them from invasive medical interventions and provide for them care procedures which are ethically acceptable.

Secondary (prevention)

Action taken to detect a health problem at an early stage in an individual or a population, thereby facilitating cure, or reducing or preventing it spreading or its long-term effects (e.g. methods, screening, case finding and early diagnosis).

Tertiary (prevention)

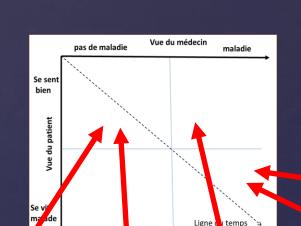
Action taken to reduce the chronic effects of a health problem in an individual or a population by minimising the functional impairment consequent to the acute or chronic health problem (e.g. prevent complications of diabetes). Includes rehabilitation.

Quaternary prevention is more than a factual activity. It's a way of thinking about the job which applies in the other fields too (as shown by the arrow), covering such items as overmedicalisation by overinformation, overscreening, overdiagnosis, overtreatment, as well as avoidable care, protection of the patient and more generally the limits of medical care.

Implicitly, patients and populations deprived of care are also in this field which covers undermedicalisation too.

P4 challenges also such strange diagnostics as "No disease disease - Medically unexplained symptoms - Worried well – Difficult patient - Functional somatic syndromes - Somatoform disorder - Abnormal illness behavior (unlimited list) "

P4 deals with Prevention of medicine



temps

The P4 model is a questioning of the appropriateness of the action

Built on individual action

It can be applied to populations and individuals

> 329 Paroxetine MSD study Ritaline difusion worldwide

vaccination Flu - HPV

Overinformation 1

Mammography PSA « Check Up »

Mediator Lipid Stent

The dissemination of the concept is now global and beyond anything we could have imagined

Almost all Latin American countries now have P4 groups and yearly conferences on the basis of quaternary prevention which is often called quaternary attitude

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sources

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