Quaternary prevention, the art of “primum non nocere”

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Let’s discuss
patient doctor relationships,
time line
and
doctor’s duty
Prevention; chronological view

Life line
Demand for care
Episode of care

Patient's health problem

Discrete variable

Birth of the clinical prevention

Prevent disease
Continuous variable

PREVENTION IS ACCOMPLISHED BY INTERCEPTING THE "CAUSES" CONTRIBUTING TO THE DISEASE PROCESS

NATURAL HISTORY OF ACQUIRED SYphilis

Agent
Prerequisite moisture

Host Elements
Sexual habits
Education on sex prophylaxis
Personality development

Environment
Climate, moisture
Family instability
Income, housing
Recreational facilities
Community control

Agent-Host Interaction influenced by Environment

TIME LINE

Pre-pathogenetic Period

I
HEALTH PROMOTION
Avoidance of disease-producing microorganisms by health education in hygiene

Prophylaxis — chemical, mechanical, and chemotherapeutic

II
SPECIFIC PROTECTION
Early diagnosis and prompt treatment

Adequate treatment to destroy all T. pallida

III
REHABILITATION
Fever and other treatment to destroy T. pallida in brain of paretics
Change the paradigm

• Let see the health problem through the Patient doctor relationships, each with their own agenda, fears, expectations and explanatory models.

• The doctor has been trained to find disease

• The patient has some reasons to approach the doctor, feeling well or ill

• Crossing those views change the insight

• Let’s take the model of the four fold table
Fuzzy limits in provider (disease) versus patient (illness) situations. Crossing gives nebulous and not clear cut fields.

Reality is sometimes more complicated than schema.

Draw by
Antonio Pedro

Museum
Soares do Reis,
Porto
<table>
<thead>
<tr>
<th>Conscience or patient's feeling</th>
<th>Doctor's knowledge</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Disease natural evolution</td>
</tr>
<tr>
<td></td>
<td>Absent</td>
</tr>
<tr>
<td>I</td>
<td></td>
</tr>
<tr>
<td>Primary prevention</td>
<td></td>
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<tr>
<td>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. immunization)</td>
<td></td>
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<tr>
<td>II</td>
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<td>Secondary prevention</td>
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<tr>
<td>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)</td>
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<tr>
<td>IV</td>
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<td>Tertiary prevention</td>
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<tr>
<td>Action taken to reduce the chronic effects of a health problem in an individual or a population by minimizing the functional impairment consequent to the acute or chronic health problem (e.g. prevent complications of diabetes). Includes rehabilitation.</td>
<td></td>
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</tbody>
</table>
Description of the practice of Family Medicine including the prevention of medicine itself.

No more prevention but action

¿what change?

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).

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).

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.

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.
One encounter, various possible levels of problems
Easy glide from P1, P2, P3 to P4

Doctor side

Health information
Health education

Immunization

Screening

Early diagnosis

Therapy

Incidentaloma

Missed diagnosis

The doctor sends the patient in the field 4

The patient sensitive to misinformation

Applying P4

Patient's view

Avoiding false negative

Avoiding false positive

Cure & preventing complications

Time line
Over-information

overscreening

overmedicalization

overdiagnostic/ overtreatment
Family physicians work in complexity and uncertainty

Stacey diagram

Chaos


Pared. SubTe. Buenos Aires
Quaternary prevention involves the need for close monitoring by the doctor himself, a sort of permanent quality control on behalf of the consciousness of the harm they could do, even unintentionally, to their patients.

Quaternary prevention is also about understanding that medicine is based on a relationship, and that this relation must remain truly therapeutic by respecting the autonomy of patients and doctors."
The general conclusions of various seminars were that quaternary prevention is not a technique but an attitude, an active thought about the facts and about the doctor himself in action.
Fast worldwide spread of the concept since 2008
P4 groups and friends:

- Brazil
- China
- Uruguay
- Argentina
- Chile
- Peru
- Paraguay
- Bolivia
- France
- Germany
- Switzerland
- Spain
- Portugal
- Thailand
- Vietnam
- USA
- UK

Montevideo, 21 mars 2015. Wonca CIMF Special Interest Group on Quaternary Preventión
2016 : WONCA Special Interest Group: Quaternary Prevention & Overmedicalization
“Health is a resistance. Resistance to disease itself. Also resistance to violence and harassment, resistance to drugs, resistance to exploitation, resistance to junk food, resistance to pollution, resistance to disastrous housing conditions, resistance to the pharmaceutical market, including resistance to mercantilization of health care and, therefore, sometimes resistance to medicine itself. As healthcare professionals, we are trying to help them resist.”
Consider the P4 semantic network

http://babelnet.org/synset?word=quaternary+prevention&lang=EN&details=1&orig=quaternary+prevention
merci

http://www.nogracias.eu/2016/12/26/la-salud-como-resistencia-un-manifiesto-por-la-prevencion-cuaternaria/

www.ph3c.org/p4