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THE ASSOCIATIONS  
OF DIETITIANS

# **Fostering collaboration between General Practitioners and Dietitians to improve nutritional patient care**

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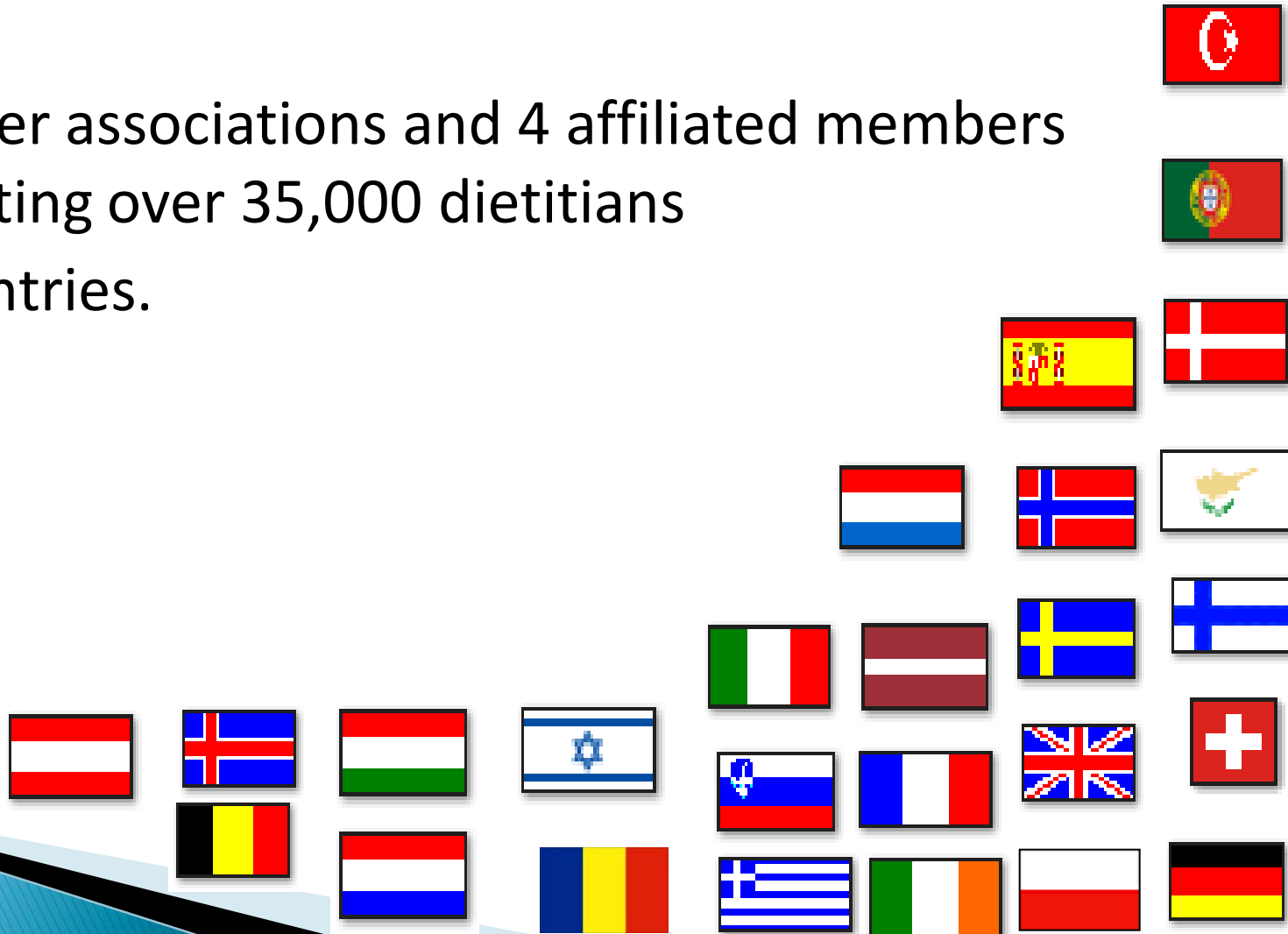
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EFAD :

27 member associations and 4 affiliated members

Representing over 35,000 dietitians

in 27 countries.



# Standardising the practice of dietetics across Europe

EFAD has partnership with a lot of organizations and plays a fundamental role by sharing information, alerting about nutritional issues, in many areas.





# Introduction

Improvement of the population's nutritional condition is a major issue for Public healthcare policies in Europe, and in the world

In most European countries national health plans give recommendations about nutrition

Dietitians are included in the working groups of these plans

*In France the Programme national nutrition santé (PNNS),*

*In Luxembourg Plan d'action national "Gesond iessen, méi bewegen",*

*in Switzerland the Programme national nutrition et activité physique (PNNAP)...*



# Introduction

Dietitians are experts in nutrition

Health-dietitian's role in nutrition is generally recognized in hospitals as dietary act is based on medical prescription. Nutritional care is included in the patient's care pathway.

Since length of stay in hospitals is decreasing, more patients will move to primary care.

This will increase the need for involvement of dietitians in primary care.

This will require good collaboration between general practitioners and dietitians.



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# EFAD survey

## Aim of the study

This study tried to explore dietitian's views on collaboration between general practitioners (GPs) and dietitians in primary care.



# Research question

Main question:

What do dietitians think of collaboration between general practitioners (GPs) and dietitians in primary care

Sub-questions:

1. Do GPs make optimal use of the expertise of dietitians?
2. What are barriers or facilitators for optimal collaboration between GPs and dietitians?
3. Is dietetic consultation in primary care reimbursed?

# EFAD survey

## **Method:**

- On line questionnaire
- From 1-30 june 2018 , 2 reminders
- 27 countries, European associations of dietitians, all EFAD members
- 3 questions , completed by interviews for more information



# EFAD survey

## Results:

27 countries surveyed, 18 responded (66%)

Question 1: Do you think General Practitioners make optimal use of the expertise of dietitians in your country (do they send patients that would benefit from dietetic consultations to dietitians)?

Yes: 0 %

No: 100%

# EFAD survey

## Comments:

- ▶ GPs do not discuss much about nutrition during their consultations
- ▶ Give “unaccompanied” general advice : “eat less, move more, stop snacking”
- ▶ Give information via support provided by pharmaceutical industries

## Results question 2

Gps do not guide much towards dietitians because :

- ▶ Nutrition is made by different kind of people, not always qualified (un-recognized/unqualified professions: coaches, nutritherapists...)
- ▶ They re not always familiar with the profession of dietitian
- ▶ Geographical distribution of dietitians is very unequal on the territory
- ▶ Even if there is a dietitian in his area, GP does not necessary know her/him
- ▶ Sometimes they are in a competitive position

# EFAD survey



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GPs do not guide to dietitians because dietary consultations are not refund/ reimbursed by the national health insurance

## Results question 3

### Reimbursement by health insurance in 5 countries

- ▶ Netherlands : 3 hours/a year
- ▶ Switzerland: only private Health Insurance
- ▶ GB : on community center
- ▶ Belgium: only for diabetes and severe renal insufficiency
- ▶ Germany: only for mucoviscidosis & PKU



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# EFAD survey

The limit of the survey : all these data come only from responses of Dietitians associations

A broader survey including a sample of GPs would have allowed to have a more objective vision



## International medico-economic studies

showing the positive effect of a nutritional care both on the patient's health and on medico-economic plan.

- ▶ 1. HASSELT JT, GAMES AD, SHAFFER N, HARKINS LE Nutrition support team management of enterally fed patients in a community hospital is cost beneficial J Am Diet Assoc. 1994
- ▶ 2. ELIA M et al. The cost of diseases-related malnutrition in the UK and economic considerations for the use of oral nutritional supplements (ONS) in adults Redditch, UK. British Association for Parenteral and Enteral Nutrition 2006
- ▶ 3. LAMMERS M, KOK L, Cost-benefit analysis of dietary treatment, SEO Economic Research Amsterdam 2012, Commissioned by the Dutch Association of Dietitians (Nederlandse Vereniging van Diëtisten)
- ▶ 4. HOWATSON A. et al. The contribution of dietitians to the primary health care workforce. J Prim Health Care. 2015 Dec 1;7(4):324-32;



## **Cost-benefit analysis of dietary treatment**

Commissioned by

Dutch Association of Dietitians - Nov 2012

Authors M Lammers and L Kok

Shows that nutritional management of obesity by a dietitian has benefits for the health of patients and their families, and that expenses can be avoided.



- ▶ It's worth including dietitians in primary care
- ▶ This is very cost-effective
- ▶ This requires good collaboration between GPs and dietitians
  
- ▶ Ways to improve could be ...





# Improvement

Working together, it is knowing each other, knowing that the other exists, and trust him/her

- ▶ Dietitians should rise their visibility among GPs of his/her area
- ▶ Dietitians should communicate about their contributions and benefits to GPs
- ▶ Participate to meetings where GPs go
- ▶ Join a multidisciplinary care team



# Improvement

## Searching means of reimbursement (partly or total) for dietetic consultations

- ▶ Private Health insurances: mobilize the profession to raise awareness of private health insurances and increase their support
- ▶ Networks (Obesity networks, oncology, diabetes...)
- ▶ Check what is being done in different European countries, and take inspiration from the implemented actions



# Conclusion

Nutritional care in the community and primary care will become more important due to ageing of the population and the decreased length of stay in hospitals.

Following these changes, cooperation between healthcare professionals is fundamental, each one according to his competency level, for an optimum patient's healthcare.



European Federation of the Associations of Dietitians

[www.EFAD.org](http://www.EFAD.org)