



ORIGINAL ARTICLE

Clinical pathways for the care of multiple sclerosis patients

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KEYWORDS

Clinical pathways;
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Abstract

Introduction: Clinical pathways are standard health care methods to coordinate clinical work, reduce inter-clinician variability, improve patient care and increase staff and patient satisfaction. The aim of this study is to develop a clinical pathway capable of organising and developing standard procedures for diagnosis, treatment and care in patients with multiple sclerosis and to coordinate all medical specialists involved in this disease.

Methods: A multidisciplinary unit for the care of MS patients was developed. All of them and quality specialists analysed some international evidence-based studies, clinical guides, international guidelines and other clinical neurological pathways in several meetings and designed several documents for the clinical pathways.

Results: A clinical pathway was created consisting of a scientific-technical framework, which arranges the care in relation to the diagnosis and treatment. The framework is accompanied by various patient-information documents on the disease, an information sheet on diagnostic procedures and a map of the process. Quality standards were established to achieve continuous improvement in patient care.

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Conclusions: A clinical pathway for the care of MS patients in a multidisciplinary unit homogenises and organises the care which the MS patient should receive from the initial symptoms to the progressive stages. This clinical pathway improves the quality of patient care, reduces the variability in work protocols and rationalises the use of the available health care resources.

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PALABRAS CLAVE

Vía clínica;
Esclerosis múltiple;
Adherencia;
Cuidados;
Gestión de procesos

Diseño de una vía clínica para la atención a los pacientes con esclerosis múltiple

Resumen

Introducción: Las vías clínicas (VC) son herramientas para coordinar el trabajo asistencial, reducir la variabilidad entre el personal sanitario y mejorar la atención y el cuidado del paciente. La esclerosis múltiple (EM) es una enfermedad neurológica crónica que afecta a pacientes jóvenes y es incapacitante. El objetivo es desarrollar una vía clínica para mejorar el diagnóstico, el tratamiento y la atención de los pacientes con EM y, asimismo, facilitar la coordinación de todos los especialistas implicados en este proceso.

Método: Siguiendo el modelo FOCUS-PDCA se organiza un equipo de trabajo integrado por diferentes profesionales implicados en la atención del paciente con EM. Se realiza una revisión bibliográfica exhaustiva y se llega a consenso; así, se diseñan los documentos de la VC con base en la evidencia científica.

Resultados: Se crea una vía clínica compuesta por los siguientes elementos: una matriz temporal con una serie de anexos para ordenar el proceso diagnóstico y el tratamiento, un impreso de información a los pacientes sobre las pruebas diagnósticas, una hoja de información sobre la enfermedad y un mapa de procesos, una encuesta de evaluación de la calidad percibida y un documento con indicadores de calidad para evaluar la VC.

Conclusiones: El desarrollo de una VC de EM facilita la atención multidisciplinaria y mejora la calidad asistencial. Esta propuesta es novedosa al enfocar la atención integral de la EM desde su inicio, tanto en aspectos diagnósticos como terapéuticos, incluyendo el ámbito ambulatorio.

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Introduction

Multiple sclerosis (MS) is a chronic demyelinating disease that affects the central nervous system (CNS), with variable evolution. It is progressive and can lead to severe disability. This disease has significant social and economic impact.

MS is more common in women than in men. It is one of the most prevalent causes of disability in young adults in the world. Its aetiology is not completely understood, although it has been associated with a genetic susceptibility linked to the major histocompatibility antigen¹; the studies to date thus indicate that multiple genetic factors^{2,3} and its interaction with the environment contribute to its pathogenesis⁴.

The clinical variability of MS requires a multidisciplinary team including neurologists, rehabilitation specialists, ophthalmologists, psychiatrists, urologists, nursing staff and social welfare resources. This complexity requires a

high degree of coordination and management of resources to obtain the best care for patients.

Clinical pathways are coordination tools that detail the daily routine activities in the care of a patient with a specific diagnosis in order to obtain greater optimisation⁵. They are welfare plans that are applied to patients with a specific process, and who present a predictable clinical course⁶. They define sequence, duration and responsibility for the activities of health personnel for a particular procedure, thereby improving the quality of assistance^{7,8} and reducing variability in clinical practice⁹. Clinical pathways were implemented for the first time in the New England Medical Centre in Boston by Zander in 1980¹⁰. These pathways present a way to adapt clinical practice guidelines or protocols to clinical practice; they are the operational version of clinical guidelines^{11,12}.

Most clinical pathways are designed for hospital use¹³ for attention before, during and after hospitalisation and,

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