

# THE POTENTIAL OF PATIENT EDUCATORS IN CARING FOR THE MASSES

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Dear Editor,

I wish to highlight an important issue that affects all patients with rheumatological conditions in Pakistan. Pakistani Rheumatology is still in its infancy and needs to expand fast to reach the population of over 17 Crore and counting. The increasing sophistication of current knowledge in our subject suggests that there will be real benefits to individuals as well as to society from such an expansion, as many countries have recognized. For example the professional society in the UK (now BSR: British Society of Rheumatology) has expanded from 100 members to over 1500 in the last 30 years. Pakistan would need at least 1700 Rheumatologists to bring them to the western standards. Thus achieving rheumatological care for all will be a massive task - but Pakistan has successfully faced many more of those since independence. Lateral thinking may help.

Doctors are not the only answer to the service provision problem. Adopting the role of a team leader can be more productive than working in the capacity of a consultant, however busy. Associated Health Professionals (AHPs) have a major role to play in Rheumatology. Nurse specialists in this field like many others also have a vital role in UK clinics and support doctors by explaining diagnoses and enhancing drug compliance to change possibly successful therapy into reality. Physiotherapists can provide effective care for a large proportion of musculo-skeletal disorders in the general population. Both these AHP's play a very important role in health education and this may be the most important thing they do. We know patients from a higher social class suffer less disability from arthritis, live longer more productive lives, and have a longer life expectancy<sup>1</sup>. All these factors relate directly to the education level of the patient. Thus we suggest that to improve the reach of rheumatological care in Pakistan, the first priority is to get involved in patient education.

The way to do this is not just for the select few in major academic centres to teach the importance of rheumatological care, although this is essential to open the eyes of both medical students and politicians. Patient education should be a main feature of the doctor-led team approach to our subject, with the potential to help larger numbers that can never be seen by an individual consultant. A practical example is taken from India where a web-site in the Marati language ([www.arthriti-india.com](http://www.arthriti-india.com)) directed by one physician but reaching millions of people with tailored educational material. The weight of the combined professional rheumatology community promoting education at the public at all levels would provide powerful motivation to people to change their attitude.

Finally, we suggest that involving the patients in community-based education is an important way forward, using Pakistan's huge population as strength rather than a problem. Patients are well placed to emphasize the need to look after one-self and to illustrate the advantages of self care. Vaccine campaigns have recognized that people interact with information according to their experience and social setting<sup>2</sup>. Without community acceptance, they often fail. Patients as volunteers make excellent community educators as they are in touch with local community needs and so provide a culturally-sensitive service. They have the added advantage that new patients make an immediate connection with someone who has experienced the same problems. Trained patient educators provide the front line service at the Birmingham Arthritis Resource Centre, providing education and support personally and through phone or internet enquiries. This is highly valued by patients in the community<sup>3</sup> and even when added into the specialist rheumatology clinic<sup>4</sup>. From the viewpoint of the massive task that needs to be dealt with regarding rheumatology services in Pakistan, it should be noted that the BARC service enhances compliance while saving doctor time - as well as helping patients to cope. It is one approach to the problem which we would be happy to help Pakistani colleagues explore further.

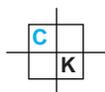
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Sincerely yours,

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