### A patient revolution for careful and kind care

# Revoltage of the second of the

**Victor Montori** 

### **Disclosures**



I chair the board of The Patient Revolution, a 501c3 nonprofit organization, and recipient of all profits from Why We Revolt.



I am a clinician at the Mayo Clinic.

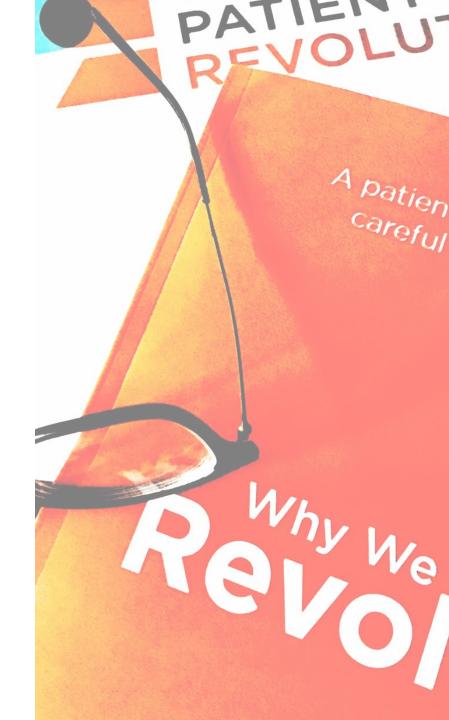


I have no other financial relations to disclose.

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## **Healthcare today**

Huge economic sector Industrial

Business aspects dominate language (thinking, doing)

"Care" is a product providers deliver
Patients must be "activated" to contribute to care
Care of high quality is sold to payers
Patients and clinicians are accountable to payers for the quality and cost (=value)

## **Healthcare today**

Care is standardized for patients like this

### **Healthcare today**

All patients become *patients like this* – **blur** Clinicians derive little meaning from this sort of care Agenda taken over by industrial concerns Focus on documentation and billing Incentives for productivity Depersonalization and loss of empathy Blurry patients get under- or over-testing/treatment Transfer of work to patients Noncompliance Accidental care, incidental cruelty

# Healthcare today Greed

Patients trapped between seduction and frustration

BUY: New treatments, new tests, new technologies

**DON'T BUY:** Less is more

Pricing linked to value VIP care

## **Technical way forward**

#### **Evidence-based medicine**

- Better evidence more confident the decision maker
  - 2. Evidence alone cannot care

TURNED INTO: tool to standardize under penalty of quality programs

### **Shared decision making**

A conversation, a dance

Arrive at care that makes sense

TURNED INTO: tool to promote choice and to reduce consumption and cost

# Way forward

A system fueled by solidarity
Care based on relationships and love
Integrity as gravitational force
Timeless and elegant care
Careful and kind care

Evidence-based medicine

Shared decision making

Minimally disruptive care

Care for this patient (HD)







