Promoting a global response to multiple chronic diseases in the age of social media: the OPIMEC experience

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This presentation summarizes progress since 2008 when the project was initiated with support from the Andalusian Health Ministry (Spain), and a team led by Alejandro Jadad (University of Toronto) and Andres Cabrera (Andalusian School of Public Health).
OPIMEC is the Spanish acronym for the Observatory of Innovative Practices for Complex Chronic Disease Management.
OPIMEC is a nonprofit initiative that promotes the development and exchange of knowledge and experiences on the management of polypathology across geographical, organizational and cultural boundaries by harnessing the power of online social media.
Guided by a well-established framework for chronic disease management, we have gone from science fiction to real life, developing a global collaborative effort that led to the release of the first co-created book focused on the challenges of people living with multiple chronic disease management.
One of the results of this collective effort is a book on polypathology that gathers the best available knowledge and the most relevant research gaps about this major challenge to our health systems.
OPIMEC is an online ecosystem with ten components powered by social media. The first five are fully developed, while the rest are shaping up nicely with input from its rapidly growing community.
To reduce the impact of multiple complex chronic diseases on the population and on health systems.

The main objective of OPIMEC is to contribute to worldwide efforts to reduce the impact of multiple chronic diseases on the population and on health systems.
To achieve this, it serves as the meeting point for an exciting group of people and leading edge collaborative resources.
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One of our top challenges is that we don’t have precise data on the prevalence of polypathology. Based on the current best estimates, there are from 700 million to 2 billion people living with two or more chronic diseases in the world. That’s between 9 and 31% of the world’s population.
It is estimated that these figures will double by 2050. One of our research priorities is to promote collaborative research on classification and detection of co-existing complex chronic diseases.
A huge global problem that involves many people.

A big global problem requires a massive global response. Successful prevention, diagnosis, treatment, monitoring and care of people living with multiple chronic diseases should involve a concerted effort involving every sector of society.
The OPIMEC community

A growing number of professionals, who are working to improve the care of people with chronic diseases, have joined OPIMEC or other social media connected to OPIMEC, like special groups on Facebook, Twitter and Linkedin.
As of April 2011, the OPIMEC community included over 700 professionals from more than thirty countries, a number that continues to grow.
03 Leadership

OPIMEC is a valuable resource to leaders committed to joining efforts to meet the challenges of polypathology.
Together, they are able to encourage other people to bring the best available knowledge, practices and resources to key local environments,
heading projects that inspire others to collaborate online, and to project, globally, the output of their efforts.
OPIMEC has now identified more than 170 practices around the world and 1300 other knowledge resources related to chronic disease management, represented by documents in multiple formats and media, which are available to health professionals, researchers, policy makers, patients and their caregivers.
The files available on the OPIMEC platform can be linked to each other and to other online social media, enabling users to share knowledge and experiences easily.
Anyone with interesting material to share, can do it on OPIMEC, simply, with a click!
Users can manage content of interest in a personal workspace which is created for them at the time of registration on OPIMEC.

Through this workspace, user can edit their profile, access to his or her contents easily, send and receive messages and invite other people to join their own personal network so as to follow their activities on OPIMEC.
Members can also create or participate in groups focused on a specific area and that need to exchange material privately, or to develop knowledge collaboratively. This includes research proposals, articles, reports, declarations, guides, books or strategic plans, among others.
OPIMEC supports several important teams, including:

The Scientific Committee of the Spanish Conference on Chronic Diseases: This is a team led by two Spanish Scientific Societies that are working on a Declaration to improve the quality of care for people with chronic diseases living in Spain.
A team developing the Strategic Plan for the management of chronic diseases in Andalusia, Spain
URSA-MAYOR: an international team developing a joint pain-European report and consultation on migration and healthy ageing
A network of ten teams who are co-creating knowledge on polypathology. This community was responsible for the first book on polypathology launched in 2010, which continues to evolve online.
OPIMEC is an open network, where anyone can create and publish interesting material, making it accessible to others, including those who are not formally registered.
05 No SPAM

OPIMEC:
- Doesn’t have commercial interests.
- Is protected by powerful anti-spam software.
- Has an editorial team which identifies, selects, reviews and verifies material of interest.
- Has external certification for the quality of its processes.
OPIMEC is becoming easier to use, thanks to intuitive, accessible tools that are constantly evaluated by its members.

The platform usability is constantly improving to match the evolution of social media resources.
OPIMEC is powered by LiveDok (Live Document for Knowledge co-creation), an open source technology that enables users to develop a document in two languages, and to improve it in response to comments from peers.
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The platform also follows Copyleft and Contributorship approaches to content management. Copyleft promotes the exchange of work without restriction and Contributorship acknowledges the work of all members of collaborative groups.
Taking full advantage of all of the technology, methodology and concepts available on the platform, members only need a good Internet connection, open web access, and basic knowledge of online social media.
The platform also uses social media to promote recognition of individuals and organizations for their contributions.
Gaining full benefit from OPIMEC only requires three simple steps:
First, to register as a formal member
10 Participation

Second, to be willing to share experiences, materials and knowledge
10 Participation

Third, to start co-creating knowledge with colleagues from the rest of the world!
Co-create

This is how the OPIMEC community succeeded in creating an entire book in less than a year, from scratch and with no in-person meetings. Volunteers contributed from all over the world, simultaneously, in English and Spanish, by using OPIMEC with no financial incentives.

To the best of our knowledge, this was the first attempt to co-create knowledge, globally around a health issue, using Web 2.0 and social networking tools and following the principles of contributorship and copyleft. It was an exciting adventure!
The lead contributors collected state-of-the-art information on the following ten different aspects of polypathology, synthesizing the best available knowledge, identifying gaps and eliciting ideas on innovative strategies to address them.
Knowledge areas - Workteams

1. **Why** Multiple Chronic Diseases? Why now? What is going on around the world?  
   AR. Jadad

2. The **language** of polypathology. M. Ollero, M. Bernabéu and M. Rincón

3. **Prevention** and health promotion. R. Smith, C. Rabadán-Diehl, A. Cravioto and A. Wall-Medrano

4. **Management models.** R. Bengoa, F. Martos and R. Nuño


6. Primary **care.** M. Ollero, JM de la Higuera, M. Bernabeu and MA Ortiz

7. Supportive care and **palliative** care. A. Lee and O. Yew Jin

8. **Integrative** medicine. C Tamayo, A Arreaza and C Almonte

9. **Socioeconomic** implications. F. Martos and E. Herrera


11. Dealing with the challenges of polypathology, together: **What’s next?** A. Cabrera, AR. Jadad
This effort set an example of global knowledge co-creation, in record time, around major health challenges, transcending traditional boundaries.
What did we learn during the process?

- It is essential to have a clear common goal, a diverse editorial group, and institutional support.
- Matching versions of the same document in multiple languages is difficult.
- Firm deadlines for contributions must be set and enforced.
- Technological glitches are unavoidable.
- Copyleft and contributorship are viable options.

These are some key lessons we learned during the process of knowledge co-creation.
More ongoing co-creation projects emerged

REPORT → European Commission

The report of a consultation by the European Commission on Active and Healthy Ageing
More ongoing co-creation projects emerged

A declaration for improving the care quality of people with chronic diseases which is driven by Spanish scientific societies. Its first version was presented in January in Seville.
More ongoing co-creation projects emerged.

The Strategic Andalusian Plan on caring for people with chronic diseases. It will be launched at the Care Quality Forum that will be celebrated in October of 2011 in Granada, Andalusia, Spain.
More ongoing co-creation projects emerged

The European Grant Planning Committee meeting to define a research agenda around the integrated systems of health and social services that are required to meet the needs of elderly individuals with complex chronic conditions.

Generating Innovative Strategies for Care of the Elderly with Complex Needs: A Dialogue with Thought Leaders from Ontario and Europe
You are welcome to participate in these projects. OPIMEC will also support any other initiative of interest to you.

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