



## Challenge: Enhancing Diabetes patients' medication adherence.

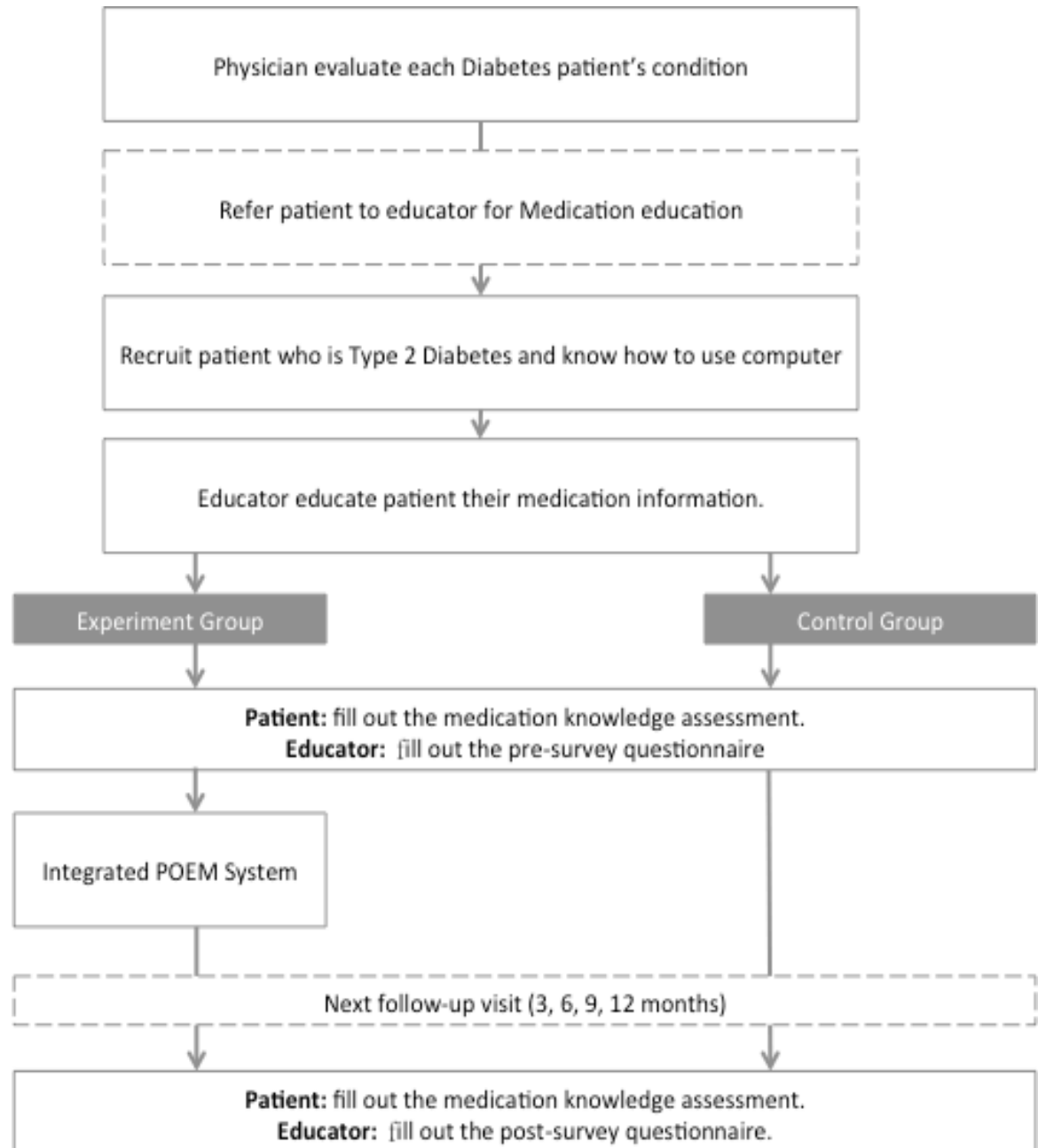
This project is focusing on enhancing patients' medication adherence by Web-based, Integrated Patient Education System.

Because Pharmaceutical treatment plays an essential role in Diabetes. If patients don't understand the medicines and dosages they take, their blood glucose control may be affected.

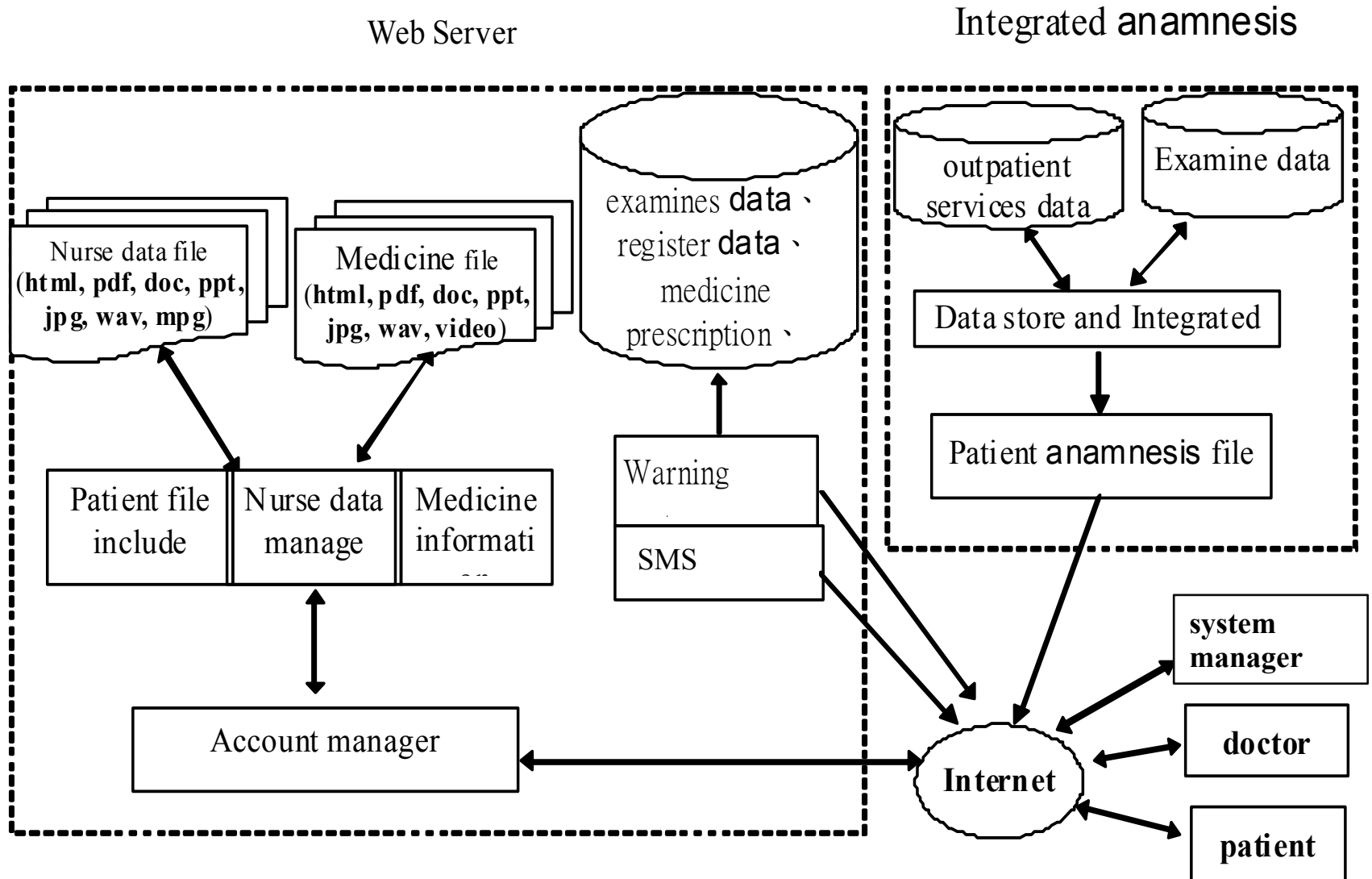


## Action:

1. I ran a series of interviews with the staff and physicians at Department of Metabolism & Endocrinology to understand the treatment process and collect all medication information for what we need to built the knowledge database .
2. On-site observation for the patient's treatment ,reaction for medication information and complaint.
3. Design and draw the flowchart. Design the post- and pre-medication knowledge assessment and survey questionnaire.
4. Based on the requirements to choose the participates then randomly assigned them into experiment and control groups.



5. Develop and design integrated patient-oriented education management system. It contains a patient's demographical data, prescribed medicine, treatment, laboratory test results of fasting blood glucose and HbA1c, the required education list, the date of visit, and the date of next follow-up.



6. I created prototype and conducted iterative usability tests to fine-tune the system design and process flow.

藥物的view - Microsoft Internet Explorer

藥物

姓名：  
年齡：65

身分證：  
預約看診日期：

藥物 有底線者，可以進一步查詢

商品名	學名
AVANDIA 4MG TAB	ROSIGLITAZONE
BLOPRESS 8MG/TAB	CANDESARTAN CILEXETIL
BOKEY 100MG/CAP	ASPIRIN
LIPITOR FC# 10MG/TAB	ATORVASTATIN
UFORMIN TABLETS 500MG	METFORMIN

藥物明細 - Microsoft Internet Explorer

您可點此圖放大  
(藥物顏色因電腦色差會有差距，請參考外觀說明)

藥物商品名稱：Uformin 藥物學名：Metformin  
藥物中文名稱：克糖錠 劑型、劑量：錠劑 / 500MG

藥物外觀：形狀：圓柱形  
顏色：白色  
直徑：17 mm  
標記一：MF/1

適應症：第2型糖尿病

用法用量：1. 本藥須由醫師處方  
2. 開始治療每天1-3  
3. 每日最高劑量應

注意事項：1. 若您計畫(已)懷孕  
知您的醫師。  
2. 老年人、虛弱、  
水、血氧過少、酗酒  
3. 服用此藥時，若  
4. 極少數有乳酸中毒  
的代謝性併發症。

保存方法：儲存於15至30度C，

1. 因本藥會儲存在  
下痢、食慾不振、  
2. 發生皮疹及扁平  
3. 發生皮膚紅腫、

Personalized on-line pharmaceutical education system

糖尿病衛教系統

首頁 登錄檢驗值 個人衛教內容 檢驗值 藥物 最新消息 本中心簡介 查詢

檢驗值

姓名：  
年齡：65

身分證：  
預約看診日期：

檢驗日期  
94/05/26

檢驗值

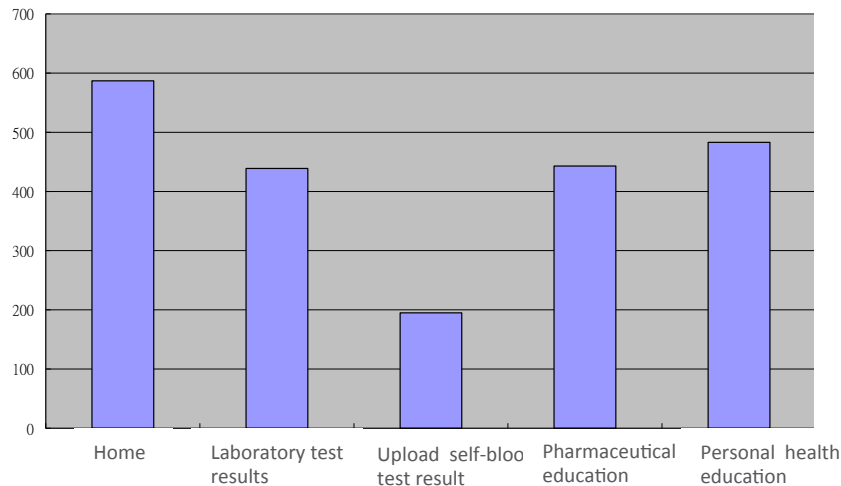
檢驗名稱	檢驗結果	參考值範圍	注意事項
CHOL	210	<200	過高
GLU	116	70-110	過高
HBA1	6.4	4.3-6.0	過高
HDLC	41	>40	過高
TRIG	158	<150	過高

Lab result

7. Implement the application to let groups to use the system ,conduct the interview for each candidate face to face and answer the survey.
8. Follow up at 3, 6, and 12 months to observe user behavior. Collect the survey results and analyze the data from lab result and survey.



Statistics each page for login



醫學資訊研究所  
的碩士論文研究  
情形，並探求可能  
遵醫囑行為之參考。  
內拒絕繼續作答。您所  
指導教授之外，他人不得  
需要您的幫助，以提供  
身體健康  
萬事如意

媛婷。目前正在  
望藉此問卷瞭解您  
，以便將此結果作為我  
有任何問題都可以詢問。  
，將一律採匿名的方式處理  
您的隱私，請您安心的參與

臺北醫學大學醫學資訊研究  
指導教授 劉建財老師  
研究生 邱媛婷敬啟

### Survey

姓名：\_\_\_\_\_ 病歷號碼：\_\_\_\_\_ 身份證字號：\_\_\_\_\_

請問您是否可以空腹吃了藥以後去運動？☐是 ☐否  
請問您打完針之後要等多久才可以吃飯？（如果您無使用針劑藥物，則  
回答此題）  
☐30 分鐘（傳統的短效胰島素） ☐10-15 分鐘（新型超短效胰島素）  
問您血糖穩定就可以不用吃藥了嗎？☐是 ☐否  
自自我監測血糖的目的是因為讓自已知道自己血糖的高低，作  
胰島素劑量的依據，使糖尿病得到良好的控制對嗎？☐是 ☐否  
，糖是指血糖濃度低於 70 mg/dl 嗎？☐是 ☐否

年 \_\_\_\_\_ 月 \_\_\_\_\_ 日

## Result :

### Data Analysis

Recruited 274 patients, 134 (57% males and 43% females) in the experiment group and 140 (46% males and 54% females) in the control group. Their characteristics are shown in Table 1.

I compared their laboratory test results including fasting blood glucose, HbA1c and total cholesterol level between the two groups from the pre-intervention to post-intervention periods, as shown in Table 2.

*Table 2. The means of fellow-up laboratory Tests*

Laboratory test	Group	N	Mean ± SD
Fasting Blood Glucose (mg/dl)	Experiment group	108	114.87± 46.98
	Control group	108	130.29 ± 42.31
HbA1C(%)	Experiment group	102	7.38±1.37
	Control group	108	8.03 ± 1.55
Total cholesterol level (mg/dl)	Experiment group	102	169.18±29.46
	Control group	108	180.50±38.95

*Table 1. The characteristics of the experiment and control groups*

Characteristics	Experiment group	Control group	P
n	134	140	
Gender (M/F)	76/58 (57/43%)	64/76 (46/54 %)	
Age (years)	65.97±8.51	61.15±12.67	0.01*
average	10 (7.4 %)	3 (2.1%)	
29 or below	10 (7.5 %)	3 (2.1 %)	
30-39	21 (15.7 %)	13 (9.3 %)	
40-49	46 (34.2 %)	41 (29.4 %)	
50-59	24 (18 %)	39 (27.9 %)	
60-69	19 (14.2 %)	37 (26.4 %)	
70-79	4 (3 %)	4 (2.8 %)	
80 or above			
Diabetes Duration (years)	5.28 ± 4.70	7.01 ± 5.44	0.004*
Education			0.82
Illiterate	13 (9.8 %)		
Elementary school	43 (32 %)	17 (12.1 %)	
/Junior high school		38 (27.2 %)	
Senior high school	21 (15.7 %)		
College or		28 (20 %)	
University	52 (38.8 %)		
Master or PhD	5 (3.7 %)	54 (38.6 %)	
		3 (2.1 %)	
Fasting Blood Glucose (mg/dl)	187.54±77.10	189.99±73.49	0.81
HbA1C (%)	9.03±2.79	8.95±2.23	0.82
Total cholesterol(mg/dl)	193.29±47.93	202.52±58.45	0.21

There were no significant differences in education background and the results of the first laboratory test between the experiment and control group.



# Outcome :

The evaluation results showed that the results of both tests reflected that the patients in the experiment group had better control than those in the control group. The patient-oriented education management(POEM) system was able to help patients to better control their glucose levels and better manage their diabetes conditions. More importantly, the POEM system supports a routine hospital patient education service, and provides the service in an easy and inexpensive fashion to patients after they have left the hospital.

Medication Information



Upload self-blood test result



Lab result



History of office visit



Personal information

