

Priority Topic: MULTIPLE MEDICAL PROBLEMS

Key Features:

This Priority Topic shares many features with **Priority Topic Chronic Disease**. Study them together! “Multimorbidity” refers to multiple chronic conditions in the same patient.

1. In all patients presenting with **multiple medical concerns** (e.g., complaints, problems, diagnoses), take an appropriate history to **determine the primary reason for the consultation**.

✓ **Multiple Comorbidities AAFP 2014**

2. In all patients presenting with multiple medical concerns, **prioritize problems** appropriately to **develop an agenda** that both you and the patient can agree upon (i.e., determine common ground).

What you should study:

✓ **Agenda-setting algorithm AAFP 2014**

✓ **Patient-Provider Agenda toolkit**

3. In a patient with multiple medical complaints (and/or visits), **consider underlying depression, anxiety, or abuse** (e.g., physical, medication, or drug abuse) as the cause of the symptoms, while **continuing to search for other organic pathology**.

What you should study: see also **Priority Topic Somatization** BUT remember that mental health diagnoses are not the same as somatization. Rule out mental health diagnoses using screening tools like PHQ-9, GAD-7, etc.

✓ **Somatic Complaints and Psychosocial Stressors BMC 2010**

4. Given a patient with multiple defined medical conditions, [periodically assess for secondary depression](#), as they are particularly at risk for it.

What you should study:

✓ [Multimorbidity and Depression SGIM 2015](#)

5. Periodically re-address and re-evaluate the management of patients with multiple medical problems in order to:

- [simplify](#) their management (pharmacologic and other).
- [limit polypharmacy](#)
- minimize possible [drug interactions](#)
- [update therapeutic choices](#) (e.g., because of changing guidelines or the patient's situation).

What you should study:

✓ [Collaborative Care Plans AAFP 2013](#) **Doesn't quite hit all these points, but important and relevant!**

6. In patients with multiple medical problems and [recurrent visits for unchanging symptoms](#), **set limits** for consultations when appropriate (e.g., limit the duration and frequency of visits).

What you should study:

✓ [Setting Limits on Demanding Patients AAFP 2010](#)

✓ [Fresh Perspectives AAFP Blog 2017](#) **On self-care and boundary-setting**