

## Health IT promotes disease registries to follow patient outcomes: AHRQ

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The Agency for Healthcare Research and Quality has developed a draft guide for disease and condition registries that are standalone data collections that follow the outcomes of affected individuals over time. The agency of the Health and Human Services Department seeks public comment on the [draft](#).

Adoption of health IT will make it easier for physicians and hospitals to develop disease data collections. Registries can be an efficient and effective strategy to evaluate new treatments and, in particular, those that affect a small number of the population where they truly need information, said AHRQ director Carolyn Clancy yesterday at the World Healthcare Innovation and Technology Congress in Washington.

Once providers implement health IT, they can populate multiple registries from their clinical information systems and electronic health records, she said.

“The potential that that gives us — the strategy of deriving registries and collections and longitudinal followup of patients from standalone health IT systems that are part of the core fabric of health care organizations — is unexcelled,” she said.

She cited the example of a registry developed by the University of Pittsburgh in Pittsburgh, Pa., of patients who have lost weight. Journals continue to use research based on the outcomes tracked in that registry, she said.

AHRQ is planning more investments in health IT demonstration projects. The agency next week expects to announce \$24 million in funding for studies by providers to show how to improve safety and quality in physician offices and clinics, “including transitions in care where we far too often drop the ball,” Clancy said.

AHRQ has poured \$165 million over the last two years in health IT demonstration projects by hospitals, clinics and physicians with a focus on those who provide care for rural and underserved populations.

Clancy also highlighted software for physicians that her agency recently made available for download at the AHRQ [site](#). The electronic preventive services selector lets providers enter age, gender and risk factors, and it lists recommendations from the U.S. Preventive Services Task Force. Physicians can download the software to their PDA, and it will be updated. Clancy expects a version for consumers soon.

“This is making the right thing to do the easy thing to do,” she said.

The ePSS is designed to aid clinical decision-making at the point of care and contains 110 recommendations for specific populations covering 59 separate preventive services topics. The software cross-references the patient characteristics entered with the applicable task force recommendations and generates a report specifically tailored for that patient.