

Health Care Research & Implementation

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Dear ladies and gentlemen, dear colleagues, dear readers,

it is our great pleasure to present the first issue of our special issue “Health Care Research & Implementation”. Coordinated by the German Network Health Services Research (Deutsches Netzwerk Versorgungsforschung e.V., DNVF), the special issue will be published twice a year as a supplement to the journal “Das Gesundheitswesen”. The collaboration with “Das Gesundheitswesen” offers an important advantage for authors: The articles will be listed in Medline from the first issue, so the research results presented will appeal to an international readership from the very beginning. We are grateful to Thieme, the publisher of “Das Gesundheitswesen”, and Prof. Wildner, the Editor-in-Chief of “Das Gesundheitswesen”, for giving us this opportunity.

The primary goal of our new special issue “Health Care Research & Implementation” is to increase the visibility of outcome research, health care research and health services research in Germany for a broad national and international readership. To achieve this goal, articles will be published online as Open Access in both English and German.

Driven by the Innovation Fund of the Federal Joint Committee (G-BA) and other national funding programs for evidence-based health care and health care research, there is a growing body of research addressing specific challenges of the German health system. Examples include (but are not limited to) interdisciplinary and interprofessional models of care, cross-sectoral health care, regional care, patient empowerment and participation in clinical decision-making, use and linkage of routine health care data for health services research and digital health interventions. These challenges are not unique to the German healthcare system but apply to a gre-

ater or lesser extent to other international models of health care delivery, making the solutions developed of great interest to an international readership. Although the Innovation Fund and other programs have produced robust, high-quality evidence for several complex interventions and measures to increase effectiveness, safety, and health economic effects in routine healthcare, only a very small proportion of the projects recommended for implementation in routine healthcare have been implemented in the German health care system so far. A better understanding of the implementation barriers as well as positive examples for the effective implementation of evidence-based concepts in routine care are therefore the second focus of our new special issue “Health Care Research & Implementation”.

This first supplement documents the wide range of methodologies used in our work, including qualitative research, randomized trials of complex interventions, evidence generation from clinical cohort studies and registries, and mixed methods studies.

Willy Gräfe and colleagues report on a randomized controlled trial to investigate the effects of an easy-to-understand patient letter on patients’ health literacy after hospitalization [1]. Although the study did not find statistically significant effects on health literacy in general, measured with a validated instrument, the intervention group’s understanding of specific advice, e. g. medication instructions, improved. The study shows once more the low level of health literacy among patients in German hospitals, which however is a very important determinant of health status and needs to be considered in further initiatives. A very interesting methodological report on the specific challenges and practical solutions for conducting sound qua-

litative research under pandemic constraints is presented by Anastasia Suslow et al. [2].

The results of health services research are also becoming increasingly important as an evidence base for macro-level decision-making, such as in the health care reform currently under discussion in Germany. The WIZEN study [3] has consistently shown that treatment in certified cancer centers is associated with better patient outcomes such as longer progression-free survival and better overall survival. However, the relative risk estimates commonly used in health services research are not easy to interpret for health policy makers. The article by Veronika Bierbaum et al. describes a methodologically sound way to derive the absolute effects in terms of years of life saved from the hazard ratios reported in the WIZEN study. The macro-level of health services research is also the focus of the study by Luisa Tischler and colleagues, who report on the effects of the closure of a paediatric hospital ward in a sparsely populated region in Mecklenburg-Western Pomerania [4].

Complex interventions for mental illness are the focus of two articles in this first issue of the journal: Peter Falkai and his team provide illuminating insights into the long road from the first randomized trials of endurance exercise therapies for patients with schizophrenia conducted 15 years ago, through the growing evidence base, to the implementation of exercise therapy in current clinical guidelines [5]. Kristina Diehl and colleagues investigated the extent to which the effectiveness of complex, multi-component interventions for dementia patients in a nursing home depended on strict adherence to standardized procedures, which was not always possible due to the constraints associated with the COVID 19 pandemic. The results illustrate the importance of adherence to treatment protocols in complex settings and challenging situations [6]. The last article in this issue by Datzmann et al. focuses on the integration of patient-related outcomes, clinical data, biodata and health insurance data for health services research and clinical research using the Trial Registry Platform of the German NCT as an example [7]. The area of data use and integration for research is one of the areas in which Germany perhaps lags the most behind our international colleagues. Therefore, we hope that this still monocentric example will inspire other areas and become a possible blueprint for nationwide efforts.

We would like to thank the authors, the reviewers, the members of the editorial board and the staff of the editorial office for their intensive support in the compilation of this first issue! They all did a fantastic job and helped us to present the new special issue at this year's German Annual Conference on Health Services Research.

We hope you enjoy reading this special issue. Thank you for your interest - and we look forward to hearing from you!

In addition to this special issue, "Das Gesundheitswesen" is publishing a digital special issue. Like the articles in the print edition, the articles in this digital issue can be found in the journal's online archive and can be located via literature databases such as PubMed. In addition, the articles in our digital special issue are published Open Access and are freely accessible to everyone.

Conflict of interest

JS reports institutional grants for investigator-initiated research from the German GBA, the BMG, BMBF, EU, Federal State of Saxony, Novartis, Sanofi, ALK, and Pfizer. He also participated in advisory board meetings as a paid consultant for Sanofi, Lilly, and ALK. JS serves the German Ministry of Health as a member of the Sachverständigenrat Gesundheit und Pflege.

WH hat Honorare für Vorträge, Fortbildungen, Teilnahme an Podiumsdiskussionen, Fachartikel und Tätigkeiten als Berater und Gutachter erhalten. Geldgeber waren Gesundheit Nord gGmbH Klinikverbund Bremen, Pfizer Inc. New York, LAWG Deutschland e. V. (Verein der Forschenden Pharmaindustrie), Jansen Cilag General Services, Gemeinnützige Umwelthaus GmbH FFM Kelsterbach HamNet, UKE, Pfizer Inc. New York, Novartis, Zentralinstitut der Kassenärztlichen Bundesvereinigung, Akademie für Sozialmedizin M-V, Frankfurter Forum für Gesellschafts- und Gesundheitspolitik Landessozialgericht NRW, AOK Nordost, EpiConsult (Leiter Prof. Dr. Eberhard Greiser), Hamburgische Arbeitsgemeinschaft für Gesundheitsförderung (HAG), Ärztekammer Baden-Württemberg, Roche. Dr. Bierbaum confirms that there is no conflict of interest.

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