

Family Medicine Epidemiology

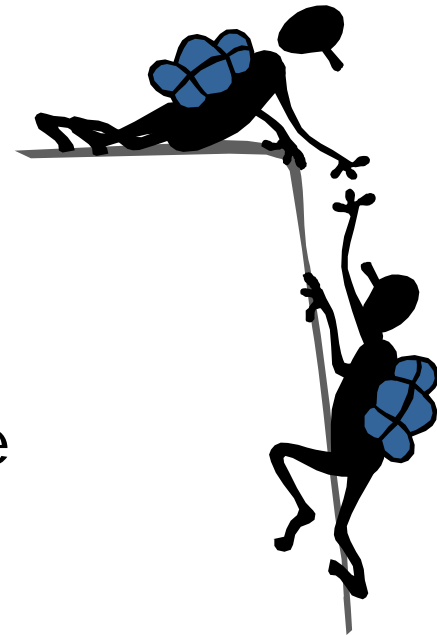
Past, Present and Future



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Outline

- Importance of Research for FM
- Definition of FM Research
- Requirements for FM Research
- Landmark Studies
- Current Challenges
- Methodological Issues
- FM Research Tools
- Future Areas of Research
- McGill Family Medicine Perspective



Why Research in Family Medicine?

- ❑ Devaluation of family medicine – 50% GPs in 1960 vs 18.6% in 1970
- ❑ Decline in interest by medical students – 44% in 1992 to 28% in 2005
- ❑ Clinical research driven by specialists for specialists
- ❑ Family medicine research needs to reflect family practice

Why Research in Family Medicine?

“Self-image of family physicians has not included research as a normative descriptor” -Herbert, 2004

“If you want more evidence-based practice you need more practice-based evidence” - Lawrence W. Green, 2008

What is Family Medicine Research?

- ❑ Academic Discipline: distinct body of knowledge that is advanced by scholarship and can be taught to practitioners in the discipline
- ❑ FM Research: asking and answering the questions of family physicians in their settings with patients that look like their patients
- ❑ Unique attributes of FM research:
 - ❑ Distinct epidemiology
 - ❑ Importance of context of care
 - ❑ Strong link & responsibility to community
- ❑ Need to systematically examine, understand and improve the work that is done

Requirements for FM Research

- ❑ More clinician-researchers
- ❑ Funding devoted to primary care research
- ❑ Support and nurture physicians who are interested in clinical research in their own practice
- ❑ Sustain/develop practice-based research networks – spectrum of research
- ❑ Study what matters while balancing academic requirements
- ❑ Study methods that fit FM research

Landmark Studies

- ✓ Top 20 Journal of Family Practice Papers cited from 1981 – 1993
 - ✓ 7 studies on prevention & screening
 - ✓ 6 on clinical practice & teaching
 - ✓ 4 on mental health
 - ✓ 3 on clinical decision making (i.e. imipramine for low back pain)
- ✓ Articles that have changed family practice:
 - ✓ Cancer prevention strategies: who, when, how
 - ✓ Use of antibiotics: otitis media, bronchitis
 - ✓ Social Issues: depression, problem drinking
- ✓ Analysis of RCTs indicates low quality but almost half non-pharmacological

Current Challenges

- ❑ Scholarly work (research productivity and publication) declining (?as of 2002)
- ❑ Overwhelming amounts of information but many pertinent questions remain unanswered
- ❑ Role of family physicians changing and research needs to change as well
- ❑ BUT: dissatisfaction, uncertainty about role and contact with real people essential to continuing creativity

Methodological Issues

- ❑ Data collection
- ❑ Complex patients + complex practice = complex data
- ❑ Patient data + physician data + many others = clustering in data
- ❑ Combining quantitative and qualitative data
- ❑ Symptoms vs diagnoses
- ❑ Patterns over time

Tools to meet the challenges

- FM Epidemiologists!
- e-tools (in our lifetime):
 - Longitudinal data
 - Feedback to physicians
 - Pertinent information at point of care
- Research training: medical students, community physicians, clinical-researchers, researchers
- Mixed methods

Research for a FM Epidemiologist

- ❑ Medication use particularly in the elderly
- ❑ Role of electronic prescribing in family practice – evaluation studies
- ❑ Use of administrative health data for family medicine research
- ❑ Systematic data collection tools: symptoms, adverse events, communication

Future Research

- ❑ Treatment of infectious diseases
- ❑ Treatment of chronic diseases in complex patients – harmonized guidelines
- ❑ Patient safety in family medicine:
 - Medications
 - Whose patient is it anyways?
 - Role of the Patient
- ❑ Research training for family physicians specific to FM research
- ❑ Pharmacogenomics in Primary Care

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Mission Statement

**McGill University
Faculty of Medicine
Department of Family Medicine
Research Mission Statement**

The Faculty Researchers at the McGill Department of Family Medicine aim to support learning and knowledge generation about what, why and how health care services are funded, organized, managed and delivered. In doing they contribute to the wellbeing of individuals and collectivities.

Researchers' core values are intellectual honesty, commitment to excellence, openness to research plurality and innovation, and promotion of interdisciplinarity and collaborative approaches within and beyond academic boundaries.

In synchrony with the Faculty of Medicine, our main objectives are:

- 1. Education** – To offer educational programs to under- and post-graduated students, faculty members and community physicians that support their up-to-date clinical knowledge, and help them appreciate the importance for their clinical practice of the context within which they provide/will provide care.
- 2. Research** – To encourage outstanding medical and health services and policy research, as well as to foster the emergence of a critical mass by supporting high-quality research trainees and research training programs.
- 3. Service** – To serve the society by generating, sharing and using actionable knowledge useful for better understanding and improving health care delivery, and then the health of individuals and populations.

Next: [Participatory Research](#)

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