

What is Primary Care?

NAPCRG Patient and Clinician Engagement Preconference

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November 21, 2014

New York City



Primary Care

- Introduction
- Exercise as participants define characteristics of PC
- Food for thought - Fundamental Flaws and Persistent Paradoxes
- Conclusions

(supplementary materials)



Health Care Systems Providers

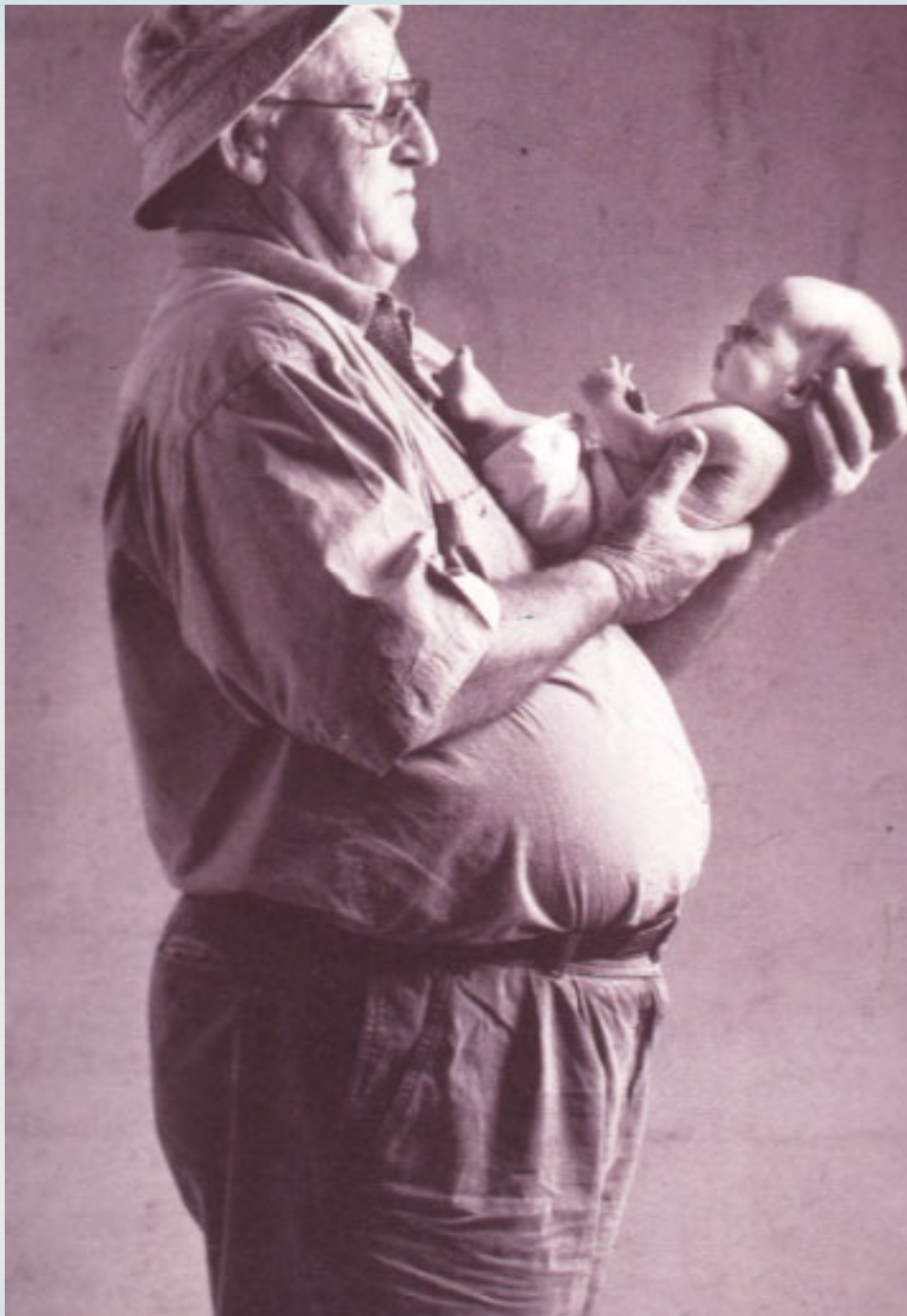
Quaternary Care—Specialized Hospital
•Transplants

Tertiary Care—In Hospital Care
Community Hospitals

Secondary Care—Specialists

Primary Care





Primary Care Delivers Better Health Outcomes

↓ Mortality

↓ Morbidity

↓ Medication Use

↓ Per Capita Expenditures

↑ Patient Satisfaction

↑ Greater Equity in Health Care

Source:

B. Starfield, et al., "The Effects of Specialist Supply on Populations' Health," *Health Affairs* (March 2005); W5-97



People do better with primary care.

Source:

Starfield B, Shi L, Grover A, Macinko J. The Effects of Specialist Supply on Populations' Health: Assessing the Evidence. <http://content.healthaffairs.org/cgi/content/full/hlthaff.w5.97/DC1>



Future search exercise



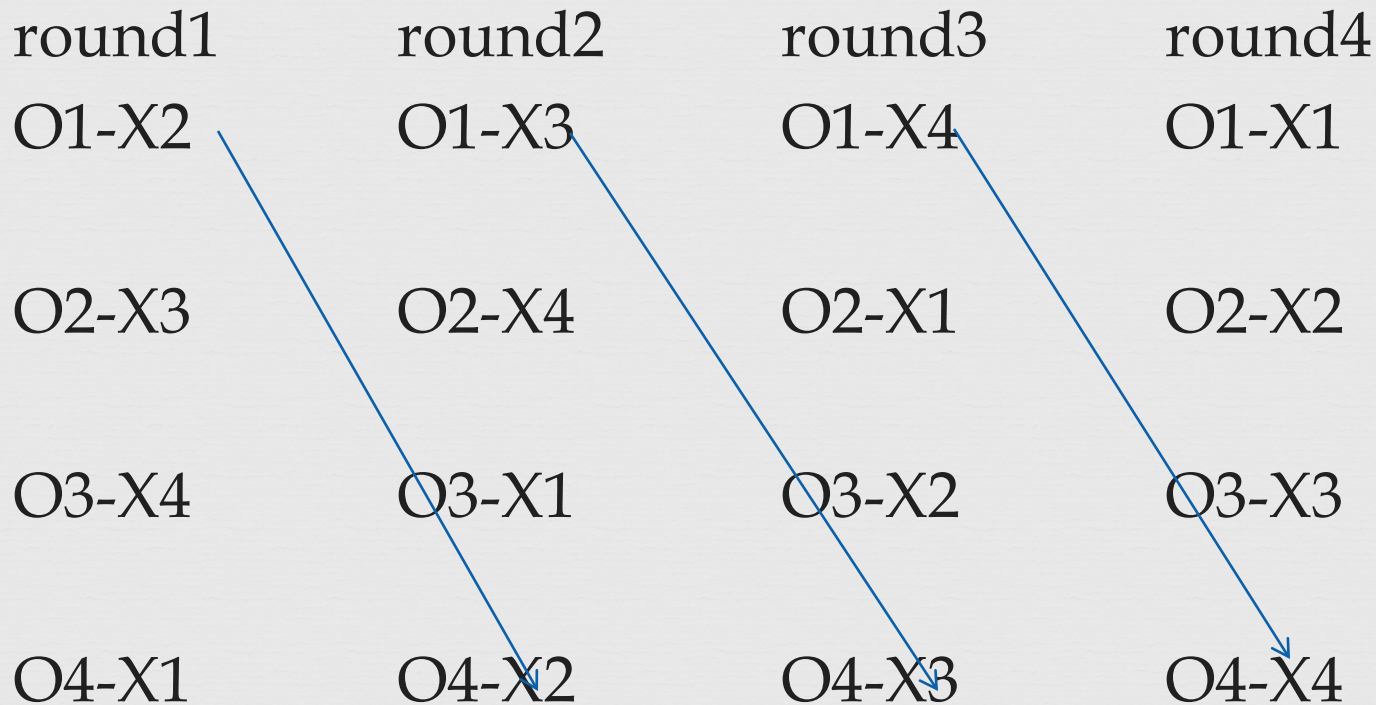
(Speed dating for PC)

Questions for our future search

- ∞ 4 questions- 4 lines of 4 dyads
- ∞ Front of the room is top of the line
- ∞ Dyads – 1 minute to answer each question
 - ∞ No cross talk just scribe
 - ∞ X asks the question then O
 - ∞ At 2 minutes X moves up the line, O stays put

Future search visual

(same movement for all four groups)



Questions from our future search

1. What is primary care?
2. What does primary care do for your community or health care system?
3. What causes you concern about your primary care?
4. What would you tell your legislator or Dean are 2-3 reasons to support primary care?

Results of our future search

-8 people at each question with answers from all 32



- ☞ Truths – patterns that jump off the page (>70%)
- ☞ Trends – many responses (>50%)
- ☞ Unique ideas – considerations by a few people

Results of our future search

-8 people at each question with answers from all 32

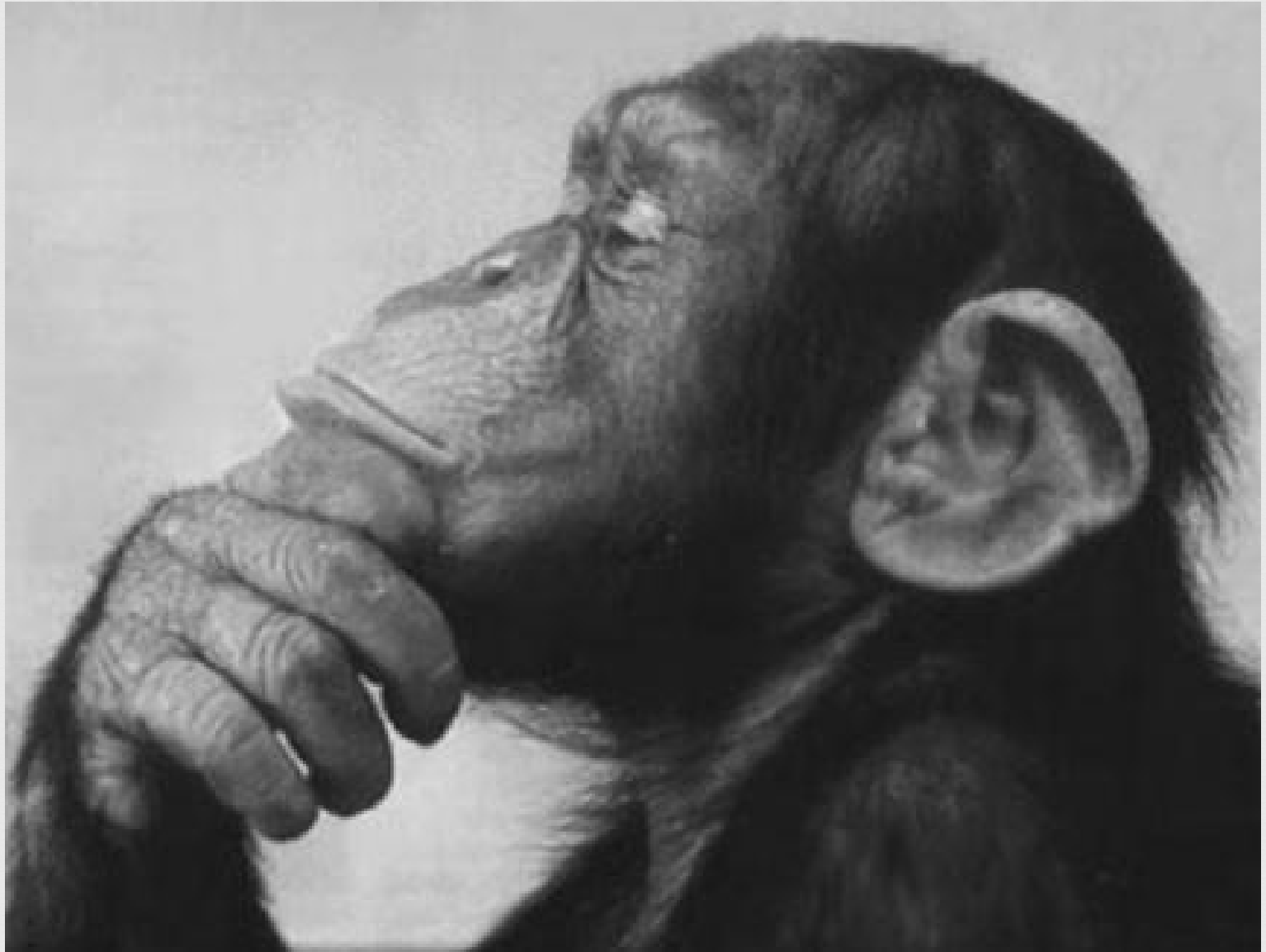


- ❧ Leader is the person with the most red in their clothes
 - ❧ Timekeeper < 30 seconds / response
 - ❧ Goal is complete exercise by 10 minutes
- ❧ Go to each person sequentially
 - ❧ Each participant gives one answer
 - ❧ Start with truths and mark by tick similar responses until no more new truths
 - ❧ Do the same for trends and then unique ideas
- ❧ Scribe is youngest person in group Reporter is the shortest person in the group

Summary of future search – report back

Truths, Trends and Unique Ideas for

- ∞ #1. What is primary care?
- ∞ 2. What does primary care do for your community or health care system?
- ∞ 3. What causes you concern about your primary care?
- ∞ 4. What would you tell your legislator or Dean are 2-3 reasons to support primary care?



So why don't we realize
all the potential of primary
care?



Food for thought.....

Persistent Paradoxes



Primary care physicians provide poorer quality care for specific diseases. Primary care physicians provide better whole person health.



**Primary care is so complex no
one can do it.**

**Primary care is so simple
anyone can do it.**



Characteristics of Primary Care

- Average visit: 3 – 8 problems
- Diagnoses:
 - other specialists: top 5 = 90%
 - family doctor: top 25 = 60% total

Complexity	<u>FM</u>	<u>Card</u>	<u>Psych</u>
Est. total complexity	44.04	42.78	17.49
Duration of visit (min)	15.79	20.47	33.63
Complexity per hour	167.31	125.40	31.21

Sources:

Beasley JW. *Ann Fam Med* 2004;2:405-410.

Stange KC. *J Fam Pract* 1998;46(5):363-8.

Katerndahl DA et al. *Ann Fam Med* 2010;8:341-347



Patients want a continuous healing relationship with a primary care physician.

Patients want convenient health care from whomever is available.



Consumers / Patients

United States – patients want :

1. Lower premiums
2. To keep their own doctor
3. The latest technology

Willing to see a nurse practitioner or physician assistant if an MD is not available.

Interest in using innovative health information technologies

- Interest in using innovative health information technologies
- App that reminds you to take medication 40%
- App to set and track progress towards health improvement goals 41%
- App that enables access to medical records and treatment information 44%
- Videoconferencing for sick visits 56%
- Self-monitoring device to check condition and send information to doctor electronically 62%
- Videoconferencing for follow-up visits 67%



Fundamental Flaws

- More is better
- Reductionism
- Intelligence
- Dichotomous thinking
- The bell curve
- Health and disease



More is Better.

The false positive screening test
Over treatment

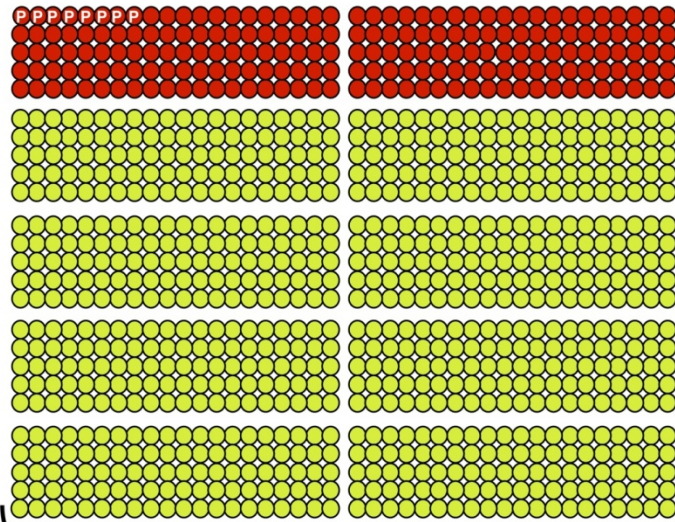


Prostate Cancer Early Detection

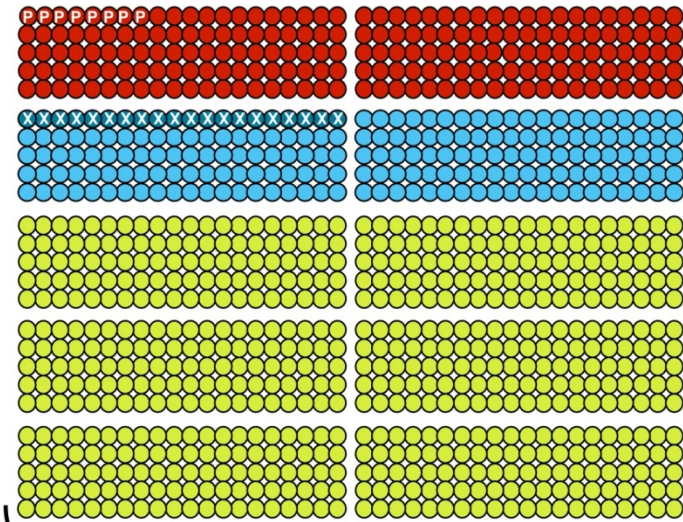
by PSA screening and digital-rectal examination.

Numbers are for men aged 50 years or older, not participating vs. participating in screening for 10 years.

1,000 men without screening:



1,000 men with screening:



● Men dying from prostate cancer:	8	8
● Men dying from any cause:	200	200
⊗ Men that were diagnosed and treated for prostate cancer unnecessarily:	–	20
● Men without cancer that got a false alarm and a biopsy:	–	180
● Men that are unharmed and alive:	800	600

Source:

Djulbegovic M, Beyth RJ, Neuberger MM, et al. (2010). *British Medical Journal*, 341:c4543.



Reductionism

Making attributions to the whole from a part



Intelligence

- Clinicians intelligence
- Patients intelligence



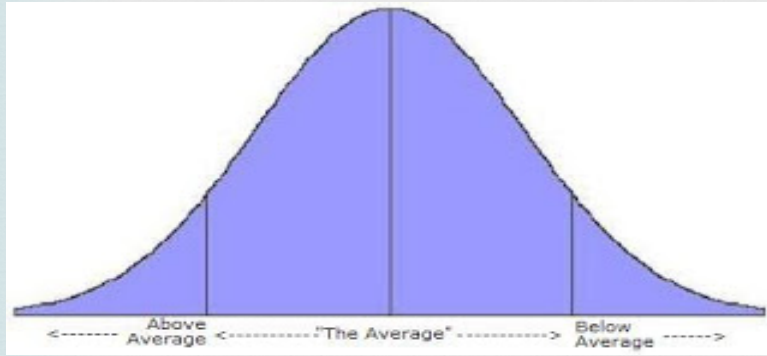
Dichotomous thinking

Specialists/Partialists vs. Generalists



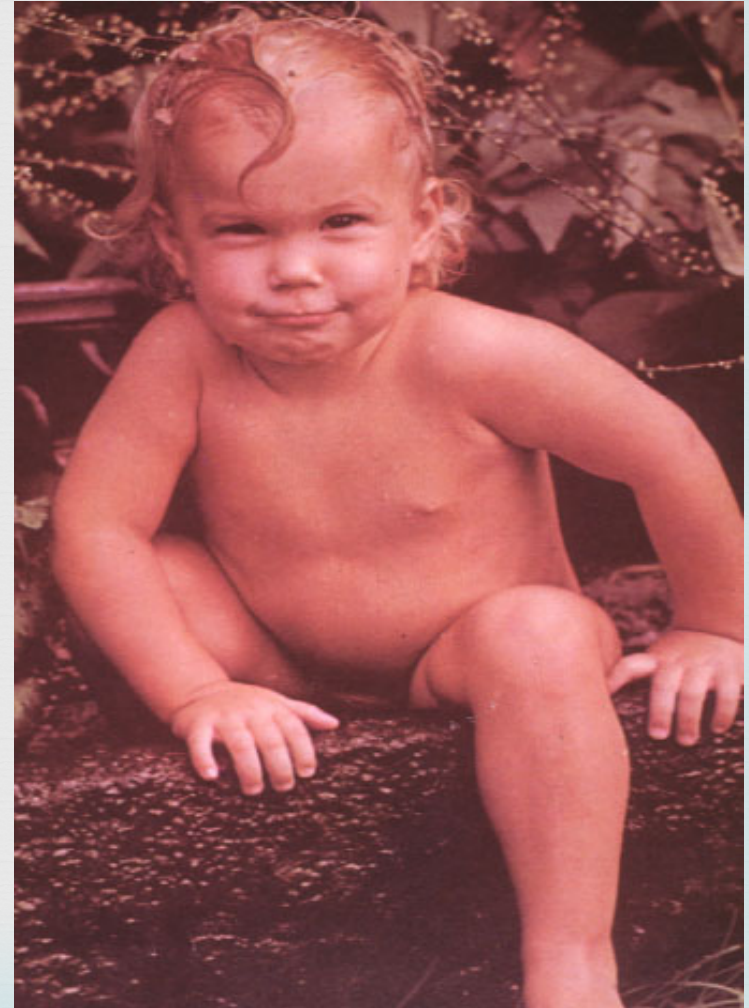
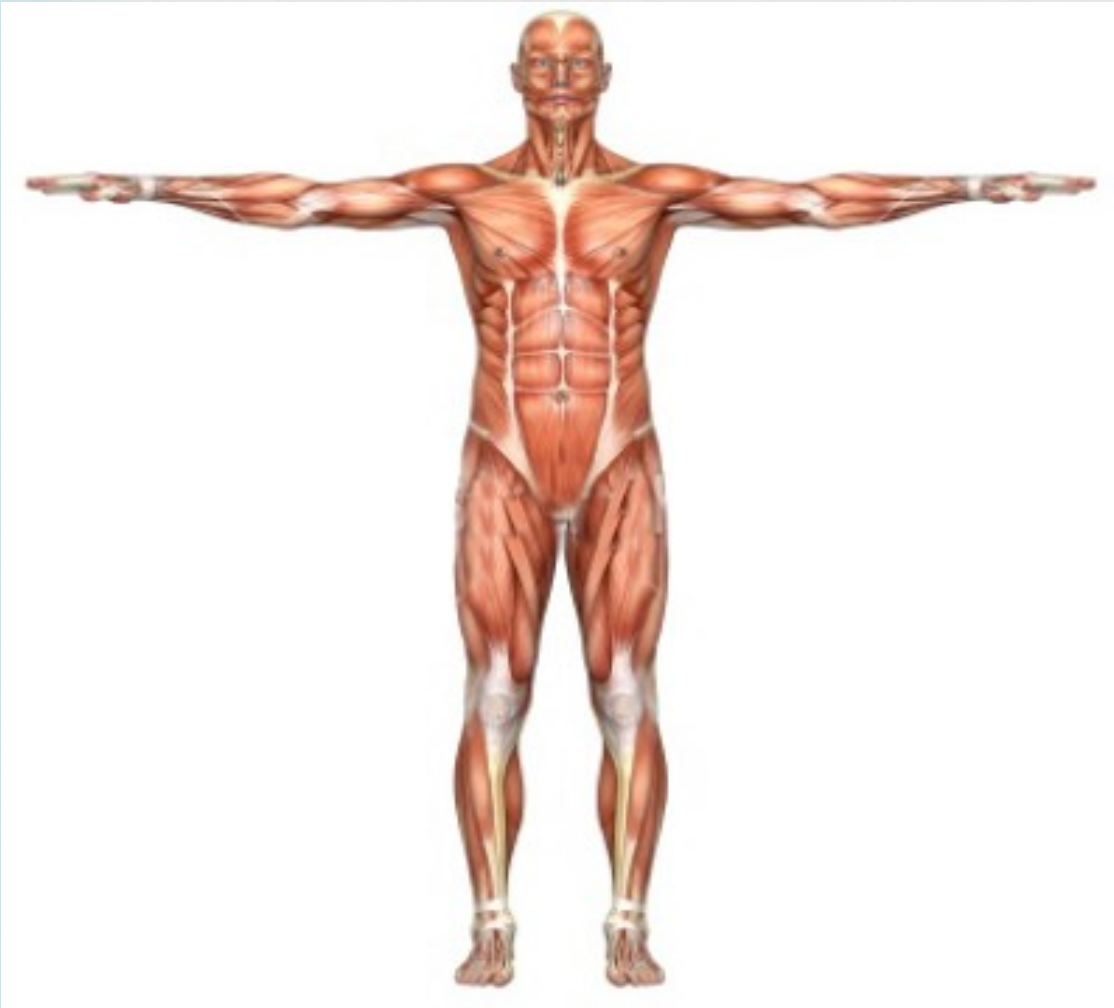
The Bell Curve

Measures of central tendency and the outliers



Health, disease and illness

Health is more than the absence of disease



Diabetes is diabetes,
is diabetes
.....NOT

It is much more important to know what
sort of a patient has a disease than what sort
of a disease a patient has.

Sir William Osler



Primary Care Patients

- 40% of new presentations never fit criteria for any known diagnosis
- 40% have multiple co-morbid conditions
- About half over 65 years have at least 3 conditions
- 20% over 65 years have 5 or more conditions
- 75% of complaints are self limited
- 80% < 65 yrs, 40% > 65 yrs

Sources:

Starfield B. Milbank Q 2005;83:457-502

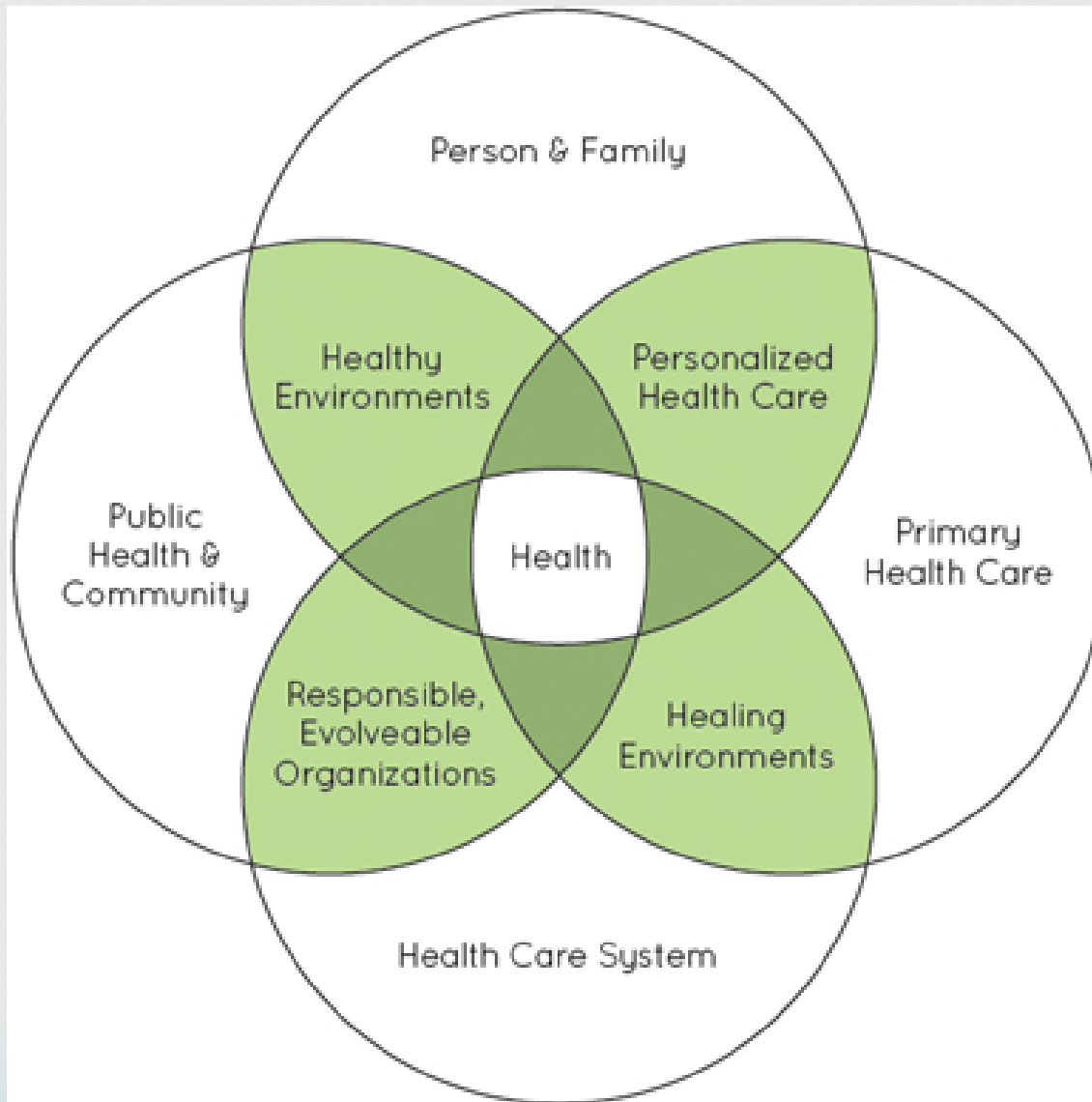
Starfield B. Ann Fam Med 2005;3:215-222



The Mystery



Promoting Health Across Boundaries



Primary Care Integrative Functions

- Vertical & Horizontal
- Process and Content

