Practicing FPs Have "Tremendous Advantage" in Research, says Journal Editor

Paul Nutting, MD, a Denver, Colorado family physician, is a pioneer in practice-based research. His many accomplishments include directing research for the Indian Health Service, establishing the Center for Primary Care Research at the Agency for Health Care Policy and Research, directing the Ambulatory Sentinel Practice Network and, since 1996, serving as editor of the Journal of Family Practice (JFP). Following are excerpts from a conversation with Dr. Nutting during a recent visit to Cleveland.

Has research been a part of your life as a family doctor from the very beginning?

I was interested in research even in medical school, although certainly not the kind of research I'm involved in now. I got involved in primary care research early in my career when I went to the Indian Health Service with what I then characterized as interests in primary care, in population-based approaches or public health perspectives on primary care, and in working in underserved populations...The Indian Health Service was the ideal place because I really could combine all of those.

...In the Indian Health Service there was such a natural opportunity to study innovations in primary care and look at how it affected an entire population because we naturally thought in terms of communities, and the communities we saw were highly organized. So I did a lot of health services research early in my career that combined some of what we now think of as practice-based research and what we now think of as community-oriented primary care research.

(Continued on page 2)

Study Looks at Outcomes of Family Focus

New research from the Network Study of Family Practice (also known as the Direct Observation of Primary Care Study) breaks new ground in assessing the effects of different approaches to family care on patient outcomes and time use in the patient visit. The study, by Jack Medalie, MD, and colleagues at Case Western Reserve University, is titled "Two physician styles of focusing on the family: Their relation to patient outcomes and process of care." It appears in the March issue of The Journal of Family Practice.¹

The study builds on earlier research from the Network Study which identified two styles of family focus: a family history style, which uses family information as context for caring for the individual patient, and a family orientation style, in which the family is the unit of care.²

The current study looks at several characteristics and outcomes associated with family focus styles. Physician demographics, such as age or gender, were not related to whether a physician had a family (Continued on page 3)
Journal Editor Seeks to
“Reunite Research and Practice”
(from page 1)

When did you get involved with the JFP?

I joined the editorial board in the early ’90s and became editor in 1996, which is a wonderful job! The Journal was started in 1974, the very early days of our discipline, by John Geyman, one of those giants of the early days who actually turned a vision into reality. I think it has, more than any other journal, chronicled the intellectual development of our discipline, so it’s a tremendous honor just to be a part of that...I take it very seriously but it’s also a lot of fun...

Do you see a changing role for the Journal as the health care environment continues to evolve?

Not so much a changing role...[but] I think the research that we’re publishing is evolving a lot, in several important ways. It’s maturing very, very rapidly, in terms of the variety of methods that are being used, the kinds of settings in which our research is being conducted and to which the results can be applied, and I think we’re grappling with ever more important research questions. I’m very proud of our discipline and its ability to let the importance of the research question drive the research and methods used, instead of vice-versa. I suspect history will record that family practice in this period was pretty remarkable in its ability to cut right to the most important questions.

The nature of family practice is so broad-based and that’s reflected in the articles in the Journal. Does that present any particular challenges to you as an editor?

I think so. Because family practice is faced with such a variety of important questions and because the researchers in our discipline are addressing some of those questions on a broad front...it is sometimes a bit of a challenge to...reflect both the breadth of what’s being researched as well as enough depth in particular topics to be making a contribution.

We try to select articles always based on excellence in research methods but also to reflect the diversity of work that’s going on...

How do you try to appeal to the interests of a broad spectrum of family physicians?

The challenge is to meet several agendas: the agendas of practicing physicians for timely information they can apply in their practice, and the expectations of the academics and researchers who are publishing cutting edge thought and discussion about relevant topics derived from the research that we publish.

One of the things I’ve tried to do both in practice-based research and the Journal is to figure out new and innovative ways to reunite research and practice, so that research is relevant to practice and the needs of practice drive our research agenda. That’s certainly not unique either to me or the Journal, that’s a tenet of family practice.

What do you want readers to take away from an issue of the Journal?

I would hope that the academics read it and not only are informed about current research but also understand a bit more about practice, and that practicing family physicians not only take away information that’s relevant to their practice but are challenged to think a little bit more about some of the vexing issues that face our discipline.

Is that the idea behind the “Observations from Practice” section in the Journal?

We try to focus that feature on relatively brief articles that represent studies done in practice that reflect an appropriate amount of research vigor...[and] appeal to practicing physicians either because they are directly applicable or very interesting. A lot of practicing family physicians in my experience are delighted to learn things that may not change what they do but that give them an appreciation of the challenges and context that other family physicians work within. So this feature is definitely trying...to focus some part of the Journal’s scientific work on the challenges practicing family physicians face.

(Continued on page 3)
What’s your advice to a family doctor in practice who’s new to research?

The practicing family physician who’s interested in getting involved in research has a tremendous advantage that people like me only wish we had: that is, a ton of practice experience and a great deal of exposure to the important research questions. I guess my advice would be to more finely develop the ability to draw on that experience to identify and refine truly important questions. The hardest part of doing research is identifying an interesting question, getting it right...Rather than trying to become more like the researchers, I would encourage physicians to trust those instincts and the perspective that helps them distinguish the important questions from those that are less relevant.

focus. However, physicians with a high degree of family history style were more likely to be younger, female and residency-trained than other physicians. In addition, their patients were more likely to be new to the practice, younger, female and minority race.

Patients were equally satisfied with the family focus styles and rated physicians similarly on three of four components of the quality of primary care. However, patients receiving a family orientation style rated their physicians higher on a measure of in-depth knowledge of patient and family than did patients receiving a family history style.

The study also looked at the association between family focus and the delivery of preventive services. Patients of physicians with a high family history focus were more likely to be up-to-date on prevention screening and counseling services, compared to patients of physicians with a lower family history focus or a high level of family orientation.

What do these findings mean for practicing physicians? The authors suggest that there are trade-offs between the family orientation style, in which in-depth family knowledge is a high priority, and the family history style, which has a greater focus on preventive service delivery. These trade-offs suggest a need for family physicians to understand their own family focus style and, when necessary, to find alternative ways to address specific patient needs not met by that style.

For more information, see the March issue of The Journal of Family Practice.

References


Submit Your Card Study Ideas!

According to Paul Nutting, MD, a national leader in the development of practice-based research, practicing family physicians have both the instinct and perspective necessary to identify important research questions (see interview, page 1). And thanks to a simple and quick method of data collection—the card study—it is easier than ever to translate many research questions into practice-relevant studies.

A card study looks at a focused, well-defined research question. In fact, card studies are often ideal for those clinical or behavioral questions that come to family physicians during patient care sessions. As the name implies, card study participants gather data on pocket-sized cards during the course of their regular practice day. As a result, there is minimal burden on clinicians and practices.

If you have a research question that might lend itself to a card study, we encourage you to complete and return the form on page 4. For further information, contact Robin Gotler at 216-368-0837 or rsh@po.cwru.edu.
Submit Your Card Study Idea!
(from page 3)

Card studies offer an easy and effective method for gathering data on questions that are relevant to daily practice. If you have a question that might lend itself to a card study, please complete the form below and fax to the RAPP office at 216-368-4348. For further information, call Robin Gotler at 216-368-0837.

Name: ________________________________ Phone: ________________________________

Mailing Address: _________________________________________________________________

1. What is your research question?

2. What would the study measure?

3. What is already known (in the literature) on this question?