# COUNCIL OF ACADEMIC FAMILY MEDICINE

Association of Departments of Family Medicine
Association of Family Medicine Residency Directors
North American Primary Care Research Group
Society of Teachers of Family Medicine

## *PRIMARY CARE RESEARCH: Its Unique Role in Health Care*

**Primary Care Research:**

- Touches the lives of all Americans – most people get most of their care in primary care practices
- Studies the whole person – real people with more than one disease, not just one disease at a time
- Provides evidence that is unique to, and critical for, the delivery of primary care
- Studies common, important conditions often not cared for in hospitals or specialty clinics
- Is essential for high quality, which supports efficient and coordinated care delivery
- Has a statutorily-mandated home at the Agency for Healthcare Research and Quality (AHRQ)

**Primary Care Research Includes:**

| Types of primary care research | Examples of primary care studies |
|---|---|
| Understanding disease prevention, chronic care management, acute illness treatment, and undifferentiated symptoms care. | -- Would medication assisted treatment for opioid use disorder, delivered in primary care settings, reduce opioid-related deaths? <br> -- An offer of delayed antibiotics for respiratory infections is acceptable to patients and associated with little difference in symptom resolution.[1] |
| Understanding how to better organize health care to meet patient and population needs | -- Does offering behavioral health and primary care in the same clinic increase depression treatment? <br> -- Does a resulting increase in depression treatment reduce work absenteeism? |
| Translating science into primary care practice | -- Can a primary care practice implement childhood obesity reduction?? <br> -- Does delivery of a basket of evidence-based treatments in primary care for older Americans reduce heart attacks? |
| Evaluating innovations to provide the best health care to patients | --An interactive preventive health record, funded by AHRQ and developed in primary care, increased the uptake of recommended preventive services.[2] <br> -- A novel hospital discharge program, funded by AHRQ and developed in primary care, reduced readmissions by 22 %, saving $34 million.[3] |
| Engaging patients, communities and practices to improve health | --Do community partnerships improve adherence to evidence based guidelines? <br> --Does patient engagement in weight loss plans affect health outcomes? |

[1] Little P, Rumsby K, Kelly J, Watson L, Moore M, Warner G, Fahey T, Williamson I. Information Leaflet and Antibiotic Prescribing Strategies for Acute Lower Respiratory Tract Infection. JAMA. 2005; 293: 3029-3035.
[2] Krist AH, Woolf SH, Rothemich SF, Johson RE, Peele JE, Cunningham TD, Longo DR, Bello GA, Matzke GR. Interactive Preventive Health Record to Enhance Delivery of Recommended Care: A Randomized Trial. Annals of Family Medicine. 2012; 10(4): 312-319.
[3] Agency for Healthcare Research and Quality. Building Bridges Between Research and Practice. Available at https://www.ahrq.gov/sites/default/files/wysiwyg/cpi/about/impact/ahrq-works.pdf.

**Specialty Care Research is not Primary Care Research:**
Most Americans get the majority of their care in primary care settings, such as family practice, internal medicine, and pediatric practices. However, federal funding overwhelmingly supports research on single diseases rather than the complex, multifaceted care people need. An Institute of Medicine report[4] observed that "most [specialty-oriented research] is not relevant to primary care because of its focus on singly developed diseases [and] carefully selected patients." The lack of funding for primary care research has real and devastating consequences. Little is known about how to best organize and prioritize primary care, how to introduce and successfully disseminate new discoveries, how patients can best decide where and when to seek care, and how to best approach patients with undifferentiated symptoms.
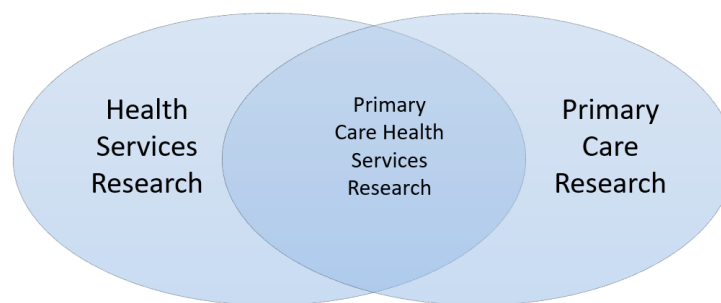
**Why Primary Care Research Matters:**
Studies from specialty settings are often the only research available with limited value in the primary care setting. Primary care patients often present with undifferentiated symptoms like "fatigue" and "aching all over", and they may differ in their social contexts, care-seeking behavior, whether they live in rural areas, co-morbidities, disease progression, and what they have tried before. Therefore, studies of patients from specialty clinics will produce results that generally are not applicable to primary care. For example, one study found that 1 in 6 patients presenting to oncologists with enlarged lymph nodes had cancer, compared with only 1 in 100 in primary care.[5] [6]

**Why AHRQ has a unique role in primary care research:**
Studying primary care is a core function of AHRQ per the statutory reference from AHRQ's authorization language as well as AHRQ's core mission to improve the quality,[7] accessibility, and affordability of health care. AHRQ sponsored research has improved primary care such as: primary care practice-based research networks, i clinical preventive services recommendations, early work on care for people with multiple chronic conditions, optimizing and improving team-based care, integrating behavioral health and primary care, and evaluating the patient-centered medical home (PCMH) model.  AHRQ's mandate includes all facets of primary care research – health services as well as clinical research (Figure).

**Figure: The Intersection between Primary Care Research and Health Services Research**

[4] Donaldson MS, Yordy KD, Lohr KN, Vanselow NA (eds). Primary Care: America's Health in a New Era. Washington, D.C.: National Academy Press; 1996. http://www.nap.edu/read/5152/chapter/1. Accessed July 6, 2016.
[5] Pangalis GA et al. Clinical approach to lymphadenopathy. Semin Oncol. 1993; 20: 570.
[6] Williamson HA. Lymphadenopathy in a family practice: A descriptive study of 240 cases. J Fam Pract. 1985; 20: 449.
[7] The AHRQ statute reads, "There is established within the Agency a Center for Primary Care Research that shall serve as the principal source of funding for primary care practice research in the Department of Health and Human Services.