

THE CHALLENGING PATH TO ESTABLISH GENERAL PRACTICE IN AN ACADEMIC ENVIRONMENT – THE CASE OF THE CZECH REPUBLIC

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A – study design, B – data collection, C – statistical analysis, D – interpretation of data, E – manuscript preparation, F – literature review, G – sourcing of funding

ABSTRACT

The academic development of general practice (GP) within countries of Central and Eastern Europe began only after the political changes in the 1990s. From a research perspective GP has a reputation for being amongst the least intellectually rigorous clinical disciplines. This has several serious consequences; loss of self-confidence, lack of attractiveness as an intellectual discipline and less application of critical thinking in routine clinical work. The only solution is an effort to develop research in primary care, as this is the ultimate attribute of scientifically oriented disciplines such as medicine.

GP research in the Czech Republic has a low level of awareness and support. Its development is slow and faces many barriers; lack of financial resources, lack of leading personalities within the field, lack of ideas, lack of scientific education, lack of experience, and insufficient research capacity. As GPs, we do not have enough skills to write and publish scientific papers. Research is also not recognised as an essential component of GP training.

However, research in primary care is developing and here I present several successful research projects within our department. Research has been proposed as a vital agenda towards the new concept of general practice, as recently presented to the government by the Society of GPs.

KEYWORDS: primary care, general practice, research

BACKGROUND

This article describes the path of general practice (GP) over the last few decades, with a special focus on the challenges, achievements and limitations of academic advancement in the Czech Republic.

At the beginning of 1980, when I started my GP training, the discipline was formally recognized but its reputation was poor, its scope of competencies was narrow and its function within the health care system was limited.

At the end of the 20th century, Central and Eastern European (CEE) countries experienced dramatic changes, including changes in health care. The opportunity to run private GP clinics increased its attractiveness. The role of GPs within the health care system has strengthened and their competencies have extended. The influence and support of the European Union to these countries has had an important effect, particularly in pushing their policies towards higher standards of family medicine. We grew up under the aegis

of international projects, such as PHARE, the World Bank and the Norwegian Funds [1-2].

GPs suddenly faced many new perspectives and possibilities. We could travel to meet foreign colleagues, participate in courses and conferences, join WONCA networks, and participate in research and quality projects. We learned, absorbed and adopted ideas, knowledge and skills.

MY ACADEMIC CAREER

I started my academic career at the Charles University in 2003. Similarly to other CEE countries, general practice was not traditionally recognised as an academic discipline. I soon learned how competitive the academic environment was and how difficult it was to assert oneself so had to adopt hard rules. I defended my thesis in 2007, completed the habilitation process and was appointed Head of the GP Department in 2009.

My team had to prove we were able to teach students and have a strong message for them, to organize our own research, publish papers in recognized journals, run international projects and also deliver high quality education for both future and established doctors.

We have received positive feedback from our students. Our teaching has been unique compared to hospital teaching in providing students opportunities to meet “naïve” patients and healthy people, and to assess problems rather than diseases. Students enjoy one to one teaching and the opportunity to learn how the GP department functions.

GP ACADEMIC DEPARTMENTS

GP academic departments play an important role in developing the discipline with scientific and professional organizations, as is the case in the Czech Republic. We have all put a lot of effort into enhancing the image and attraction of GP amongst other medical disciplines. We have worked on improving the undergraduate curriculum in GP, and have recruited GP-trainers who were able to give the best examples of good practice, based on their experience.

RESEARCH AS AN ULTIMATE ATTRIBUTE OF MEDICAL DISCIPLINE

With regards to research, GP has a reputation for being among the least intellectually rigorous clinical disciplines. This has several serious consequences; loss of self-confidence, lack of attractiveness as an intellectual area and less application of critical thinking in routine clinical work. The best solution is an effort to develop research in primary care. Research is the ultimate attribute of all scientifically related disciplines and provides many opportunities for GP development. For example:

1. Primary care is often the least described aspect of the health care system, yet 70% of all clinical contact takes place in general practice. The health care system cannot be comprehensibly understood without data from primary care. GP research in this area may contribute towards persuasive arguments for discipline leaders.
2. Research demonstrates the economic efficiency of primary care. General practice is a place of key decision-making on the provision of health services.
3. Research provides an opportunity to describe the importance of primary care through its activities in prevention, screening, early diagnostics, first line treatment and chronic disease management; all of which are of major economic importance.
4. Research helps GPs to connect with other medical disciplines.
5. GP research contributes to the development of medical science in a unique way.

6. GP research is necessary for the discipline’s survival in a competitive academic environment and for establishing the posts we need [3].

RESEARCH IN THE CZECH REPUBLIC

Currently, research in GP in the Czech Republic has a low level of awareness and support. Its development is slow and faces many barriers, similarly to other countries with a less developed GP research culture. We have a lack of financial resources, lack of leading personalities within the field, lack of ideas, lack of scientific education, lack of experience, and insufficient research capacity. We do not have enough skills to write and publish scientific papers, and research is not recognised as an essential component of GP training, whereas it is in other countries such as Croatia.

GPs are not easy research partners as they are often busy and overwhelmed by clinical and organizational demands. Nowadays it is even more difficult to recruit GPs for research projects, even if fair funding is available. Gone is the time when good funding was enough to awaken the enthusiasm of colleagues.

Another problem is that the country needs simple implementation projects or local investigations that do not offer opportunities for international publications. Primary care in the Czech Republic is also more likely to research the process of providing services, education and quality rather than to perform clinical research. Opportunities to research in GP are with interdisciplinary projects, of which our institute has implemented a few in recent years; e.g. on colorectal carcinoma screening, measurement of peripheral pressure of the lower limbs and migraine management.

During the last few decades we also had the opportunity to participate in international research projects led by experienced academic centres, such as Utrecht, Oxford, Karolinska, etc.

We have experiences from international comparative studies and are aware of their pitfalls due to the diversity in health care system organization, methods of providing family medicine, payment systems, staff composition, interdisciplinary relations, cultural backgrounds and patient behaviours.

WHAT SHOULD BE DONE?

We need to promote research in general practice at the government level in order to establish a supportive funding policy. Research has been embedded as a vital agenda towards the new concept of general practice, as recently presented to the government by the Society of GPs.

The Czech GP Society will support delegates to EGPRN, the WONCA primary care research network[4]. The Society will provide spaces at conferences and a journal for presenting research projects from general practice. Specifically, a research project funded by the Society is being prepared for a group of Ph.D. stu-

dents on the subject of rural general practice. Research may also soon become a component of the postgraduate curriculum [5].

Departments should teach research skills and provide research opportunities in primary care for medi-

cal students, PhD students and established GPs, and to create, maintain and support GP research networks. We need young practitioners dedicated to GP and research. PhD students are required as drivers of research in universities and to become future academic leaders.

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