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SHORT COMMUNICATION

CONTINUITY OF PATIENT CARE AMONG FAMILY PRACTICE PATIENTS AT A TEACHING HOSPITAL

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"Continuity of patient care" is considered an essential component of primary care including family practice.^{1,2} It is provided on a continuing basis, starting from the initial contact and includes following the patient through all phases of medical care.

It has been observed that continuity of patient care improves quality of patient care, results in better health outcomes³ and increases level of patient satisfaction.^{4,5}

Continuity of patient care improves adherence to treatment, overall service utilization, and cost of medical care. A cross-sectional analytical study was conducted at the Family Practice Center of Aga Khan University Hospital, Karachi, Pakistan, in June 2004.

On an average, 150 family practice patients with primary care level problems were seen daily by 12 family physicians. A questionnaire was developed by the principal investigator after extensive literature search including input from colleagues and patients. It was administered in English and Urdu, depending on patient's comfort and ability. A pilot study was conducted before the start of the administration of final questionnaire. The questionnaire was administered in the waiting area outside the physician's office, prior to the consultation. Ethical requirement including the administration of written informed consent and the provision of confidentiality were ensured.

Patients were interviewed based on their availability and convenience. SPSS computer software was used for data management.

One hundred patients were interviewed. The mean age of the study population was 37.94 years, majority of the subjects being females with 48% respondents having graduate or more education. Only 30% and 32% respondents were willing to consult a family physician in frequency and period respectively, as per physician's advice. Thirtynine percent respondents were willing for four weeks follow-up care only, while 45% were not willing to follow-up with physician after resolution of medical problem. Seventy percent respondents reported chances of changing their physicians as unlikely during treatment, however, 58% were found to have sometime changed their physicians. Ninetyfive percent respondents desired to seek treatment from one physician while 97% considered continuity of patient care as necessary. The other findings of this study are given in Table I.

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Table I: Patients responses to questions about continuity of care.

Patient responses	Number (percent)	Patient responses	Number (percent)
Do you seek treatment till the resolution of your medical complaint?		Has your family physician talked to you about continuity of medical care?	
Yes	93(93)	Yes	62(62)
No	07(07)	No	38(38)
Advantages of continuing medical treatment till the end? (responses=130)		Disadvantages of continuing medical treatment till the end? (responses=42)	
Resolution of disease	31(24)	Not cost effective	15(36)
Prevention of complications	30(30)	Daily routine is hampered	15(36)
Maintain good health	29(22)	Stressful	06(14)
Good quality life	25(19)	Side effects from treatment	06(14)
Awareness about health	09(07)		
Maintenance of health record	06(05)		
Do you have a regular family physician?		Have you suffered due to lack of continuity of medical care?	
Yes	61(61)	Yes	22(22)
No	39(39)	No	78(78)
Consequence of lack of continuity of medical care: (responses=22)		Will you maintain continuity of medical care in future?	
Aggravation of symptoms	16(73)	Yes	94(94)
Complications	04(18)	No	—
Late diagnosis	02(09)	Don't know	06(06)
Do you decide on return visit with your physician?		Do you keep your appointment with your physician?	
Yes	93(93)	Always	65(65)
No	07(07)	Often	20(20)
		Sometimes	13(13)
		Never	02(02)
Does your physician tell you what to do if you need help prior to next appointment?		Ways a physician can help improve continuity of medical care (responses=97)	
Yes	77(77)	Good attitude towards patient	38(39)
No	23(23)	Proper diagnosis and treatment	24(25)
		Try to satisfy patient	20(21)
		Educate patient	10(10)
		Be available	05(05)

Since the sample size was limited and the respondents were mostly educated women, the results of this study cannot be generalized to the rest of the population. Despite such a limitation, it is a valuable data on the critical issue of continuity of patient care, which can have very important implications for medical practice.

It is important to note that the willingness to consult family physician, even after the resolutions of the medical complaint, is present among half the respondents. It stresses the need to educate patients to reason why continuity of care is considered essential. Unless the patients are themselves convinced of the benefits of continuity of medical care, it is unlikely to materialize in practice.

A very high proportion of patients indicated chances of continuing treatment from the same family physician, unless there was no relief in their symptoms. It is most encouraging to note that almost all the respondents considered continuity of patient care as necessary. It then becomes essential for us to investigate the reasons as to why patients were unable to maintain the continuity of care they desired.

It must be noted with concern that almost two-third family physicians did not talk about continuity of patient care with their patients. In the light of this finding, it is indeed commendable that an overwhelming majority still considers continuity of patient care as necessary.

Further studies and intervention strategies are recommended regarding patient's education and physician's responsibilities for the improvement of continuity of patient care.

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