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General practice research

Training and capacity building

The Lancet in 1999 suggested that 'neglect of research has made primary care one of the most intellectually underdeveloped disciplines in medicine' and later labelled general practice research 'a lost cause'. According to the Medical Journal of Australia, this underdevelopment 'stems from a lack of research culture, a heavy service commitment and the late arrival of academic GPs'.

Several questions arise when considering the role of academic research in general practice.

- Does evidence derived in a tertiary centre generalise to care delivered in the relatively low tech primary care setting?
- Is efficacy demonstrated in tertiary care trials equivalent to effectiveness in the complex real world of comorbidities and the social, economic and cultural dimensions of patient interactions with general practitioners?
- What research implications do continuing clinical relationships in general practice have?
- Who will champion research in common diseases and undifferentiated early disease presentations?

Evidence for primary care needs to be generated and studied in primary care. How then can Australian general practice increase the volume, quality and relevance of its research base? How can that evidence influence general practice?

The first step is to increase the number of GP researchers and the available support and resources. It is likely that significant monetary benefits would result from such investment.⁴

It is important to engage practising GPs in generating relevant research questions, facilitating research in their practices and implementing findings. Research literacy of clinicians (and practice literacy of researchers) is vital. Academic GPs need to continue to demonstrate leadership in research that is relevant to general practice. Academic departments need to maintain a 'research culture' and foster this culture widely through collaborative links with local divisions of general practice and GPs.

The commitment of The Royal Australian College of General Practitioners (RACGP) to research, particularly through its Research Foundation and its National Standing Committee - Research, is well established. Its roles include: research funding, especially for small and pilot projects; raising research awareness; encouraging GP research literacy; facilitating research in general practices; and disseminating GP research findings. However, the RACGP has opportunities to influence research that are not yet fully realised. The culture of research and research higher degrees in GP training and practice is underdeveloped. The college has the capacity through advocacy to increase the prestige and recognition of GP research. Initiatives such as the publication of Making a difference: general practice research our patients, our community, our future, 5 point the way.

The current Primary Health Care Research and Evaluation Development program has had a marked influence on the research capacity and culture of Australian general practice. The program has supported novice researchers and influenced the research literacy of clinicians. However, a significant gap remains at the PhD and postdoctoral level. A sustainable structure of career pathways and support at this level is required.

A thriving intellectual culture is an important element in attracting some of the best and brightest into our discipline. Australian General Practice Training (AGPT) and Regional Training Providers (RTPs) go some way to generating such a culture. While AGPT provides excellent 'high end' research support through funding of academic training

posts for small numbers of registrars, there is room for improvement in the provision of research experience for the majority of registrars. Currently this is variable between RTPs. Comparisons can be made with countries such as The Netherlands and Ireland where there is a higher priority on research, the acquisition of research literacy, and the creation of opportunity to combine research higher degrees with training.

Networks of Research General Practices provide the research infrastructure of general practice, analogous to the laboratories of the basic biomedical sciences. The networks are essential in providing viable research structure and culture and must be adequately supported.⁶

Conducting practice relevant research and implementing findings in general practice is a complex, multilevel process that requires a coordinated approach with input from many players. The goal needs to be to train more GP researchers, engage more GPs in conducting research and generating research questions, and to ensure that all GPs use evidence that is grounded in general practice research. General practice research is not a 'lost cause', but rather a way forward for our discipline and our patients.

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