Interviews

EMJ spoke with Aurore Girard, Dame Clare Gerada, and Dirk Devroey. The experts shared insights into fascinating topics, including key challenges faced by general practitioners, misconceptions in primary care, and the integration of technology into the field.



Aurore Girard

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Q1 What initially attracted you to primary care as a specialism?

The first thing is probably the holistic approach to care. Primary care provides care for people for a large part of their life, and we can have a real impact on people's health.

As we follow our patients long-term, we provide advice that may impact their health for many years. The second thing is the independence and capacity to create our own network, linked to our patients' needs. Primary care is integrated to the community and local network. Finally, each general practitioner (GP) may develop their own expertise and competencies linked to their interest and patient's needs.

"Primary care is still less valued than hospital practice in patients' minds in a lot of countries."

Q2 Do you feel that there are any misconceptions about the discipline of primary care?

Sometimes, GPs are seen as other specialists' secretaries, or as an obligatory checkpoint to see other doctors. Primary care is still less valued than hospital practice in patients' minds in a lot of countries, but also in other specialists' minds. General practice is also sometimes seen as a less technical speciality. Some people see a GP practice as a 'by the way' practice, which does not really need a framework.

Q3 Medicine compliance is a key issue for primary care physicians to consider. Have you seen much improvement in addressing this challenge over the last few years?

I do not think that there are really big changes in practice. General practice always has a privileged place in a patient's health. If you take a look at explanatory notes for medication, it can be very anxiety-provoking. So, one challenge is to explain side effects without creating anxiety. Some patients take inadequate initiatives to stop or to modify their treatment, which is why one of our major tasks is to help the patient adhere to their treatment, and to co-construct it.

Q4 Another growing challenge that primary care physicians are encountering increasingly frequently is how the environment impacts patient health. Can you discuss why this can be so challenging for general medical specialists to address?

The lack of medications in Europe is a big challenge. GPs need to manage their prescriptions, and provide responsive prescriptions while thinking about their impact on the environment. A second challenge is increasing antibiotic resistance. This changes the way GPs should prescribe, while taking into consideration the environmental impact of our prescriptions. This is currently a changing mindset in GP practices. A third challenge is patient movements. The environmental impact of movement to access care is a real challenge. Some patients have to travel miles to access examinations, or a hospital consultation. Another challenge is medical waste management and sorting inside practices and clinics, which is a challenge to implement.

Q5 As President of the World Organization of National Colleges, Academies and Academic Associations of

General Practitioners/Family Physicians (WONCA) European Conference 2023, you oversaw a congress theme of 'Making choices in primary care'. Can you talk about what this theme meant, and how it shaped the organisation of the congress?

GPs need to make choices every day, especially the 'good choice'. We need to provide the best clinical examination, and the appropriate clinical management linked to evidence-based practices. We also have to link our choices with patients' preferences, possibilities, and opportunities, with special attention to their autonomy. Finally, we need to make choices to find an optimal balance between professional and personal challenges.

"There is a huge diversity between health system and remunerations."

Q6 Can you tell our readers about your personal highlights from the WONCA European Conference 2023 scientific programme?

I will remember the lecture given by Els Torreele, University College London (UCL), UK, entitled 'Why are our medicines so expensive?', and another by France Légaré, University Laval, Quebec, Canada, who presented on 'The multiple facets of shared decision making in primary care'. In my opinion, those will stay the highlights of my WONCA week.





Q7 What is the biggest challenge that WONCA faces in their goal to 'facilitate professional development and research in and on general practice and on the premises of general practice?'

Health systems in Europe are very different in each country. So, even if the diseases are the same, the resilience of each system is very different, as are the means of action levels. There is a huge diversity between health system and remunerations, which is very challenging.

Q8 You are a member of several general medicine associations, including WONCA and the Société Scientifique de Médecine Générale (SSMG). What work do these associations do to prioritise diversity in terms of the age and gender of their member GPs?

At SSMG, we try to create a welcoming virtuous circle. We take care to implement mentorship in each part of our organisation to promote young GPs. Each department is based on a junior–senior model to build confidence in leadership capacities.

We pay special attention to positive and respectful communication, and stay open to every member's suggestions to construct our development model based on real GP life. We are also very attentive to preserving a real respect between professional and private life.

Q9 How do you see the advent and integration of new technology, such as artificial intelligence (AI) and machine learning, impacting the field of primary care?

Al is a new help for diagnosis in consultation and monitoring. The add-on of primary care stays human contact, and we have the capacity to adapt support and treatment to the context and needs of each patient. A big challenge is the ethical framework of using Al, while continuing to protect the patient's safety.

Q10 What are the most significant changes you have seen in the field of primary care during your time working in the field?

The mentality of GPs and the mentality of care have changed in recent years. GPs have transferred from a vocational model to a professional model. While they still work with the same passion and devotion, they now set more limits to protect their private life and mental health, so the link to work is not the same any more. This creates new needs and challenges. In patients, we now observe more impatient and consumerist attitudes, as this new framework creates more aggression and misunderstanding. Dr Google is not very helpful to our practice, and very anxiogenic to patients.