“... those nations having either telephone consultations or face-to-face consultations exceeding 25 patient contacts a day, per doctor, find general practice unsustainable.”

**WORKLOAD AND PRACTICE**

Practice list sizes vary from 600 per GP in Belgium, to 3500 per GP in Turkey, and consultation rates per GP vary from 10–50 a day. However, this figure is confused by the fact that some questionnaire replies included telephone consultations, whereas other nations just rated face-to-face consultations.

Group practices are gradually becoming the norm throughout Europe, though Belgium still has only 3% of practices with more than one doctor. In Italy roughly 50% of practices are group practices, and in the Netherlands around 75%. The UK is still far ahead, with more than 90% of practices being group practices. In much of Europe, practices have 2–3 doctors as opposed to the UK average of 6–7.

Most practices have list sizes of 1600 or lower and that itself makes for a less stressful environment. The working day generally approaches the norm for the working population of the country, being 8 hours a day or fewer — in the Danish system GP surgeries close at 4 pm on Monday to Thursday and at 2 pm on Friday. The health of the Danish population does not seem to be adversely affected by this restriction of GP hours of access. However, despite this, 76% of EU nations feel that general practice workload is unreasonable and unsustainable.

When we examine the nations that believe the workload in general practice is reasonable, they tend to have some factors in common. They have a normal working day — that is, 8 hours or fewer, and mostly have a practice list size of 1600 or fewer per GP. They are more likely to have longer consultations and, of course, easier access to secondary care beds. However, the factor that seems to be the most important is the number of patient consultations per doctor, per day.

**CONSULTATION LENGTH AND DURATION**

Most nations have 15-minute consultations, with Scandinavian countries veering towards 20–25 minutes. Those nations with 25 consultations or less a day find general practice manageable. However, those nations having either telephone consultations or face-to-face consultations exceeding 25 patient contacts a day, per doctor, find general practice unsustainable. They have problems in both retaining GPs and in recruiting newly qualified doctors to a GP training programme.

**HOME VISITS**

Most doctors do little home visiting — though this may be due to the greater availability of hospital beds in European countries. The UK has the lowest bed numbers per 100 000 population in Europe, with France having double the beds and Germany three times as many. This means that admission of sick patients is more or less the norm. In contrast, in the UK, huge efforts are made to keep patients out of hospital.

**SUMMARY**

A profession under stress is a profession at risk. Maybe the answer is simply to reduce patient access to EU levels; to restrict doctor–patient contacts — both telephone and face-to-face consultations — to fewer than 25 a day. It may be possible to divert some demands to pharmacists, nurses, or other health professionals. It may also be possible to educate the public to self-care, at least for minor illnesses.

GPs are expensive and time-consuming to train. It would be sensible to use their skills carefully.

Mary McCarthy, Head of UK Delegation to UEMO, and GPC Representative for Shropshire, North Staffs, and South Staffs.