

The Research Paper of the Year (RPY), awarded by the Royal College of General Practitioners (RCGP), gives recognition to an individual or group of researchers who have undertaken and published an exceptional piece of research relating to general practice or primary care. The three categories are: Clinical Research; Health Services Research (including Implementation and Public Health); and Medical Education with relevance to primary care.

Papers are scored on the criteria of originality, impact, contribution to the reputation of general practice, scientific approach, and presentation.

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#### **CLINICAL RESEARCH — OVERALL WINNER**

The overall winner of the RPY award 2019, from 52 submissions (down on last year, because of COVID-19?) was the winner of the Clinical Research category, reporting a trial led by Professor Christopher Butler, University of Oxford, titled *'C-reactive protein testing to guide antibiotic prescribing for COPD exacerbations'*.<sup>1</sup>

This study recruited 653 people with acute exacerbations of chronic obstructive pulmonary disease (COPD) and demonstrated that using a C-reactive protein finger-prick blood test resulted in 20% fewer people using antibiotics for COPD flare-ups. Importantly, this reduction in antibiotic use did not have a negative effect on patients' recovery over the first 2 weeks after their initial consultation, or on their wellbeing or use of healthcare services over the following 6 months. Professor Butler says:

*'More than a million people in the UK have COPD, which is a lung condition associated*

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*"I hope that you will (re)read the winning papers and reflect on how general practice and general practice training have changed since March 2020, and how these studies are relevant to ourselves as clinicians, our practice, patients, and trainees."*

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*with smoking and other environmental pollutants. People living with the condition often experience exacerbations, or flare-ups, and when this happens, three out of four are prescribed antibiotics. However, two-thirds of these flare-ups are not caused by bacterial infections and antibiotics often do not benefit patients. Safely reducing the use of antibiotics using this test may help in the battle against antibiotic resistance.'*

With the ongoing pressure on primary care due to the COVID-19 pandemic, support for primary care clinicians in decision making about antibiotic prescribing would be very welcome.

#### **HEALTH SERVICES RESEARCH — WINNER**

The winner of category 2, Health Services Research, was led by Dr Ross McQueenie, University of Glasgow, and titled *'Morbidity, mortality and missed appointments in healthcare: a national retrospective data linkage study'*.<sup>2</sup> Dr McQueenie says:

*'This was a study of linked general practice data — 15% of the Scottish population. We found that missing multiple GP appointments was a strong risk factor for greatly increased mortality. This was the case for patients with more long-term conditions, and this risk increased with the*

*number of missed appointments. We were shocked to find that patients with long-term mental health conditions missing more than 2 appointments per year had more than 8 times the risk of all-cause mortality compared with those who had long-term mental health conditions but missed no GP appointments.'*

This work was conducted before the COVID-19 pandemic and the move to remote consulting in general practice. What might be the impact of the increase in telephone and video consultations on this vulnerable population?

#### **MEDICAL EDUCATION WITH RELEVANCE TO PRIMARY CARE — WINNER**

The winning paper of category 3, Medical Education with relevance to primary care, was *'Exploring reasons for differences in performance between UK and international medical graduates in the Membership of the Royal College of General Practitioners Applied Knowledge Test: a cognitive interview study'*,<sup>3</sup> led by Dr Julie Pattinson, University of Lincoln. Dr Pattinson says:

*'We did this study because we do not understand why doctors who did medical training abroad, most from a BAME background, are less likely to pass the licensing exam for general practice. We interviewed GP trainees while they answered AKT questions. Cultural barriers for overseas trained doctors included differences in undergraduate experience, lack of familiarity with UK guidelines and language barriers. This study provides information about how we can practically support GP trainees, including overseas-trained doctors by highlighting and addressing gaps in training and experience.'*

COVID-19 has added to the complexity of GP training and preparation for the MRCGP

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*"COVID-19 probably impacted on the number of submissions for Research Paper of the Year. What might be the impact of the increase in telephone and video consultations on our patients with multiple long-term conditions, and how do we handle missed appointments for remote consultations?"*

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examination. We know that COVID-19 has impacted on GP workload and GP training. Trainees' experiences during this time are likely to influence their career choices going forwards.

#### *Highly commended*

A study led by Dr Sharon Spooner in Manchester titled *'The influence of training experiences on career intentions of the future GP workforce: a qualitative study of new GPs in England'*,<sup>4</sup> was 'highly commended' by Panel 3. Dr Spooner reflects:

*'These findings suggest that there were deficiencies in understanding business and management aspects of general practice, and that unacceptably heavy workloads in general practice motivate many trainees to limit their hours of GP work to achieve a more sustainable work-life balance.'*

I hope that you will (re)read the winning

papers and reflect on how general practice and general practice training have changed since March 2020, and how these studies are relevant to ourselves as clinicians, our practice, patients, and trainees. What will you do differently after reading the papers?

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