

RCGP Research Paper of the Year 2005

Equal but different

This year's field was the strongest ever, with 32 submissions, 10 short listed papers of exceptional quality, and two joint winners — not following a precedent, but once again equally rated after three rounds of due consideration by the panel. The winning papers were seen as being commendably clear, well written, and as making significant recommendations for routine clinical practice. They were also very different — one with a strong basic science link, focusing on the common clinical challenge of conjunctivitis; and the other on the equally common but perhaps more complex field of primary health care provision to patients with enduring mental illnesses. The methods for both were rigorous, appropriate and accurate, the lead authors of both FRCGP, and both studies done in and with the explicit cooperation of many health professionals.

The research teams were multidisciplinary, and the studies represented a huge amount of work, involving 326 patients from 12 practices for the Rose paper,¹ and 18 focus groups with a total of 92 participants (Lester *et al.*).² Congratulations are due to the researchers, all participants, the supporting university departments, and the journals which published these papers — the *BMJ*, and (for the first time for Research Paper of the Year) the *Lancet*.

So, what of the findings? Patients with mental health problems often make primary care teams feel helpless in the face of their suffering and challenging problems, but this study found that such patients value the core characteristics of general practice — someone who knows them, listens, and access to care when required. Health professionals have accepted the value of patient review and monitoring, and could understand the highly charged views of patients on need for access, while the patients' views on how hard it is to be rational and organised enough to make best use of the services, without additional help, should be a point

for discussion for all primary care teams. The most poignant difference in views was between the health professionals' assumption of chronicity and the patients' insistence on the hope of recovery through continuing active self-help and interventions. There were telling indications that any move to specific mental health providers within practices may disrupt ongoing relationships formed through personal care, and teams should be very mindful of the wishes expressed by service users in this study to retain choice and flexibility of contact.

Choice is a challenge of the other winner's findings — the choice of GPs to listen to the evidence base, and stop prescribing antibiotics for conjunctivitis; and the choice of parents to accept this advice. The study used patient records to measure the clinical resolution, and this again represents a significant input by the public to research. The importance of carrying out studies in primary care to gain ecological validity is exemplified by this study, and its conclusions are suitably cautious — pointing out that a different infective agent (*Chlamydia trachomatis*) might make these findings more applicable to some populations than others, and that lubrication in itself may have important benefits for symptom resolution.

Chairing the panel presents significant challenges. Primary care research now produces excellent papers drawing on multiple worldviews and methods. From epidemiological work on presentation of bowel cancer, through the costs and benefits of new intermediate care models, and the subtleties of linguistic framing of symptoms as physical or psychological, the panel drew both debate and pleasure from the excellent papers reviewed, and both winners were hotly pursued by other competitors at every point on the process of selection. We are fortunate in the energies of those who research, who review, who publish, and who sponsor the

award. Well done to all concerned — you can be proud.

Amanda Howe

REFERENCES

1. Rose PW, Harnden A, Brueggermann AB, *et al.* Chloramphenicol treatment for acute infective conjunctivitis in children in primary care: a randomised double-blind placebo controlled trial. *Lancet* 2005; **366**: 37–43.
2. Lester H, Titterton JQ, Soroosh H. Patients and health professionals' views on primary care for people with serious mental illness: focus group study. *BMJ* 2005; **330**: 1122.