“... patients seem to value above all a specific diagnosis for a particular pain, rather than considering, as has become our way of thinking in the UK, how that investigation might change the outcome of that condition.”

Italian lessons: exploring general practice in Italy

The mere mention of Italy, for most people, conjures images of beautiful scenery, culinary delights, and magnificent architecture. Having thoroughly explored these particular avenues in the past, I was keen to delve into the Italian world of medicine to understand how my chosen profession works there. This was made possible thanks to funding obtained by the RCGP for 30 UK GP trainees to travel to Europe this year to spend 2 weeks observing a GP in their chosen country, with the main objective to broaden professional horizons and encourage interest in the healthcare systems of our European counterparts.

As a current ST3 trainee, for whom QOF and NICE have always existed, without a doubt the most striking difference I noted was the relative lack of financial restrictions in Italy with regards to the prescribing and ordering of investigations. Medications are almost always prescribed by brand name, first because there is little pressure to prescribe generically, and second because patients have a longstanding suspicion in the UK, but perhaps this is a battle that was waged on my behalf prior to my qualifying.

It struck me as a shame that money was being spent on more expensive versions of the same medications, while physiotherapy was unavailable on the Italian NHS. Also of note was the significantly higher rate of investigation. Analyses were accumulated through various criteria that include the number of years of residency in the area and the number of out of hours locum shifts worked. Many GPs will, therefore, work for more than 10 years as locums before being allocated their fixed post. To obtain this, points are accumulated according to the number of years of residency required to qualify as a GP, the young doctor must wait to receive the convenzione, or allocated fixed post. To obtain this, points are allocated according to the number of years of residency required to qualify as a GP, the young doctor must wait to receive the convenzione, or allocated fixed post. To obtain this, points are allocated according to the number of years of residency required to qualify as a GP, the young doctor must wait to receive the convenzione, or allocated fixed post.