The Review

2011 RCGP and Novartis Research Paper of the Year

Eighty-one papers were nominated as potential papers of the year for 2011. This is more than double the 34 titles submitted in 2010 and part of a rising trend of excellent papers from UK general practice. The reasons for this rise are the continuing increase in excellent primary care research in the UK and the inception this year of awards for each of the seven NIHR topic-specific research networks.

In the Cancer category the panel were particularly impressed by Hippisley-Cox and colleagues' *BJGP* paper *Identifying patients with suspected gastro-oesophageal cancer in primary care: derivation and validation of an algorithm*.¹ There were several papers this year exploiting the rich research potential of primary care records but this one stood out as one that has potential to change practice once further experience of the algorithm's use is gained. In the Dementias and Neurodegenerative Diseases topic area Drennan *et al*'s paper in *BMC Geriatrics* — *A taboo within a stigma? A qualitative study of managing*

*incontinence with people with dementia living at home*² — was selected as it highlighted a common but often hidden problem that we should probably ask patients and their carers about more often than we do. A *Lancet* paper by Andrews *et al* *Diet or diet plus physical activity versus usual care in patients with newly diagnosed type 2 diabetes: the Early ACTID randomised controlled trial*,³ which demonstrated that a behaviour change intervention within the first few months after diagnosis had a major impact on glycaemic control for at least a year won the Diabetes category. A highly innovative paper in the *BJGP* won the Medicines for Children topic area. Woodfine and colleagues undertook a rigorous evaluation of a complex intervention on a question that many GPs are often asked about — particularly in communities experiencing fuel poverty — *Enhancing ventilation in homes of children with asthma: pragmatic randomised controlled trial*⁴ from Wrexham showed that 17% of children with severe asthma improved to moderate levels. In the

mental health arena Coventry *et al*'s *Talking about depression: a qualitative study of barriers to managing depression in people with long term conditions in primary care*⁵ in *BMC Family Practice* described how even severe and persistent symptoms of depression become normalised in people with long-term conditions. The consequence being that patients no longer mention them and GPs don't recognise the depression despite the question prompted by the Quality and Outcomes Framework. A *Lancet* paper from the Lovibond team won the Stroke and Hypertension category with *Cost-effectiveness of options for the diagnosis of high blood pressure in primary care: a modelling study*.⁶ This suggested that ambulatory blood pressure recording to diagnose hypertension recoups the extra costs through avoiding over-treatment and is part of a programme of research by this group which recommends a major shift in clinical practice.

The Primary Care category had most submission for papers which didn't fit into any of the other six topic specific areas. The

Papers nominated for paper of the year come from a variety of journal sources.

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competition in this category was exceptionally strong with Feder *et al*'s *Lancet* paper *Identification and Referral to Improve Safety (IRIS) of women experiencing domestic violence with a primary care training and support programme: a cluster randomised controlled trial*⁷ and Swinglehurst and colleagues' *Receptionist input to quality and safety in repeat prescribing in UK general practice: ethnographic case study being highly commended*⁸ being highly commended, but the winner was *Smoking cessation support delivered via mobile phone text messaging (txt2stop): a single-blind, randomised trial*⁹ in the *Lancet*. This paper was outstanding in its innovativeness, methodological rigour, and importance to clinical practice. It helped that an intervention that doubles quit rates is already freely available — at least for people living in England.¹⁰ It was also the overall winner for 2011.

Beyond recognition of their excellence, what happens to papers of the year? We hope that they become incorporated into clinical practice and to hasten that process the RCGP informs the heads of teaching at the UK's medical schools and the GP directors of postgraduate education in deaneries across the land as well as making the list available on the RCGP website.

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Chair RCGP Paper Of The Year on behalf of the panel of judges, University of Dundee, Dundee.

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