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The experiences of remote consulting for people with chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) and fibromyalgia in primary care

Background

Restrictions due to the COVID-19 pandemic resulted in a sudden shift to a predominantly remote consulting model in primary care from March 2020. Little evidence exists examining the experience of remote consulting for people living with chronic fatigue syndrome/myalgic encephalomyelitis (CFS/ME) or fibromyalgia, with the current literature focusing on the challenges faced by clinicians and people living with these conditions. Clinical guidance highlights the importance of building therapeutic relationships and personalising care, but it is unclear how this translates into a remote or virtual consulting space.

Aim

To explore how people living with CFS/ME and fibromyalgia experience remote consulting with a primary care clinician, including synchronous and asynchronous methods, that is, e-consultation platforms, email, video, and telephone.

Method

Semi-structured interviews are being recorded and analysed thematically using a Foucauldian theoretical framework. Participants have been recruited across the West Midlands from a range of backgrounds.

Results

Recruitment is still ongoing. Preliminary analysis indicates that remote consulting is acceptable for these groups of patients, but only if they feel validated, listened to, and with a clinician who considers a holistic view with continuity of care.

Conclusion

Remote consulting has presented new challenges for primary care, and it is important to identify which groups of patients are most suited. This study explores the views from a group of patients that are associated with some complexity, and complements the literature that explores the ability to deliver relationship-based care when consulting digitally/remotely. Recommendations from the findings will be created for use by patients and clinicians alike.

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