Organization of Primary Care Research in Spain

Bonaventura Bolíbar
Scientific director of IDIAP Jordi Gol
Director of the redIAPP network

EUROPEAN GENERAL PRACTICE
EGPRN
RESEARCH NETWORK

r e d I A P P
Red de Investigación en Actividades Preventivas y Promoción de la Salud

IDIAP
Jordi Gol
Per a la Recerca a
l'Atenció Primària de Salut

Conditions for research in General Practice

1. *Associations among professionals*: Existence of a scientific society or college of GP and an own indexed journal that promotes the role of Primary Care and defines the content of their own area of knowledge.

2. *Structural conditions regarding the position of the General Practitioner in the health care system*: A circumscribed population (a fixed list), essential for having a population denominator. A role as gatekeeper in the health care system, in order to have a non-selected view of the health problems of the population for which professional care is sought;

3. *Conditions regarding the integration of Primary Care in the academic institutions:* Existence of chairs and departments of Primary Care at the university. Specialized training of GP.

4. *Conditions regarding concrete research opportunities for Primary Care (creation of organized structures):* presence of primary care in the organisation framework of health research; support and resources devoted to primary care research; existence of dual (clinical and research) contracts.

Van der Zee J, Kroneman M, Bolíbar B. Conditions for research in General Practice. Can Dutch and British experiences be transferred to other countries?. European Journal of General Practice 2003; 9:41-7.

Conditions for research in General Practice

Conditions	Netherlands	UK	Spain
1. Associations among professionals • College / Society • Journal	1956: Dutch College of GP 1957: DJGP	1952: British College of GP 1954: BJGP	1983: semFyC 1984: Aten Primaria
2. Position of the GP in the health system • Gatekeeper • Popuation list	Gatekeeper Population list	Gatekeeper Population list	Gatekeeper Population list
3. Integration of Primary Care in the academic institutions • Chairs of GP • Organization vocational training	1st chair 1973: 19 out of 21 University	1st chair 1963: 18 out of 21 College of GP + Univ.	None. 2 external chairs out of 27 Univ Training Units (PC+Hospital)
4. Research organization: • Combination P-R • Organization • Financial support	Yes Consolidated institutions (NIVEL 1965) and research networks Partial	Yes Consolidated: Research Practices + Networks+ MRC groups Partial	No, only exceptions Some consolidated experiences: redIAPP, IDIAP Jordi Gol, and some PC research units Poor

Van der Zee J, Kroneman M, Bolíbar B. Conditions for research in General Practice. Can Dutch and British experiences be transferred to other countries?. European Journal of General Practice 2003; 9:41-7.

Organization of Primary Care research: some conclusions

- The relationship with the university is based on undergraduate training. There is not any Department of Family Medicine or related. There are only two external chairs with a poor influence in the decisions of the University.

  Diplomatic skills are required to solve that issue or to get it via the back-door of related disciplines.

  Therefore, the research in Primary Care has to be created outside the University.

- No dual contracts exist and there is a poor financing support of the existing structures compared to other research areas

Organization of research in the Spanish National Health System: The Instituto de Salud Carlos III (ISCiii)

❑ **Research Institutes:**

- o National Institutes (Microbiology, Environmental Health, Tropical Medicine, Cancer, Cardiovascular, Neurologic Diseases, etc.)
- o Health Research Institutes = Hospital + University + Others (Primary Care and other): 21 institutes

❑ **Consortia and Specialised Networks:**

- o Consortia or Biomedical Research Networking Centre, (CIBER): 9 CIBER

  Hepatic and digestive diseases, Rare diseases, Public health and epidemiology, Bio-engineering and nanomedicine, Diabetes and Metabolic Disorders, Obesity and Nutrition, Mental health, Respiratory diseases.

- o Networks for Cooperative Research in Health (RETICS): 17 networks

  Addictive disorders, AIDS, Infectious diseases, Kidney diseases, cancer, cardiovascular, ocular pathology, etc.

  redIAPP (Research Network on Preventive Activities and Health Promotion in Primary Care)

❑ **Platforms:**

- o National DNA Bank, National Bioinformatics Support Platform, Proteomics Platform, Clinical Trials.

Participation of PC

ISCiii

I_1 I_2 I_3 I_X

1/17 RETICS networks

IDIAP

PC Research Units

○ PC Research group
△ PC Researcher
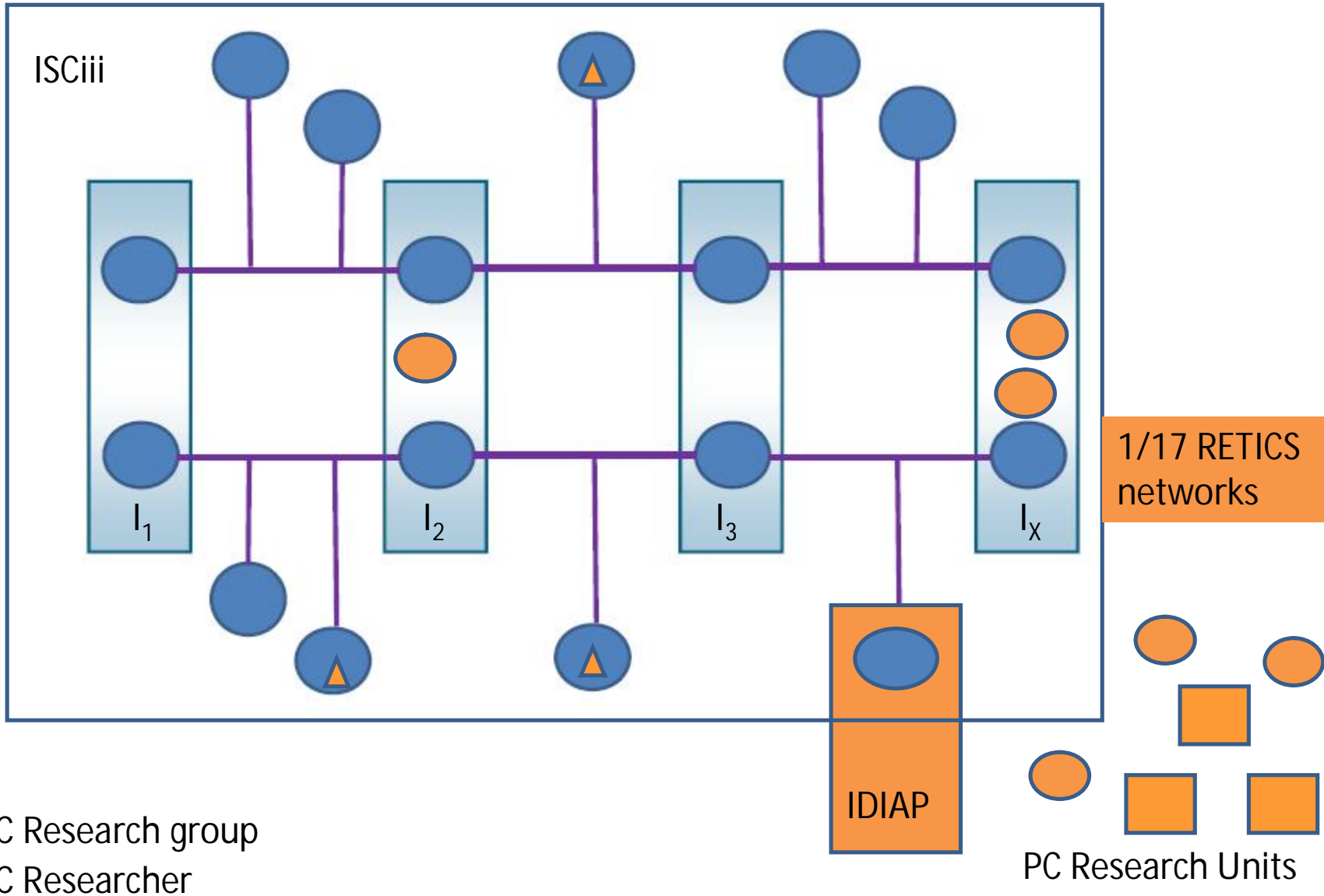
Organization of Primary Care research: some conclusions

Therefore, there is a poor presence of the PC research in the official structures and some important PC research units and groups are outside this official framework.

- – The actual policy on health research does not take into account the needs and characteristics of PC (although all politicians and decision makers always talk about the importance of PC)

- – There is a bias of the research policies towards the promotion of basic research and hospital research

2 Consolidated experiences

- IDIAP Jordi Gol Institute
- redIAPP network

Primary Health Care University Research Institute

(IDIAP Jordi Gol)

IDIAP
Jordi Gol

Per a la Recerca a
l'Atenció Primària de Salut

What is the Primary Care University Research Institute IDIAP Jordi Gol?

A public research institute created in 1996 by the Catalan Institute of Health (ICS), and with the support of the Department of Health and the Universitat Autònoma de Barcelona, with the objective of

• producing new knowledge and useful information, promoting, developing and managing research into Primary Health Care, principally in Catalonia,

• fostering training in research,

• the dissemination of its results and their application to the health services.

IDIAP Human Resources

- ✓ 53 staff IDIAP: 40 full-time + 13 part-time

- ✓ 200 primary care professionals as principal investigators in research projects

- ✓ More than 500 primary care professionals collaborating in research projects
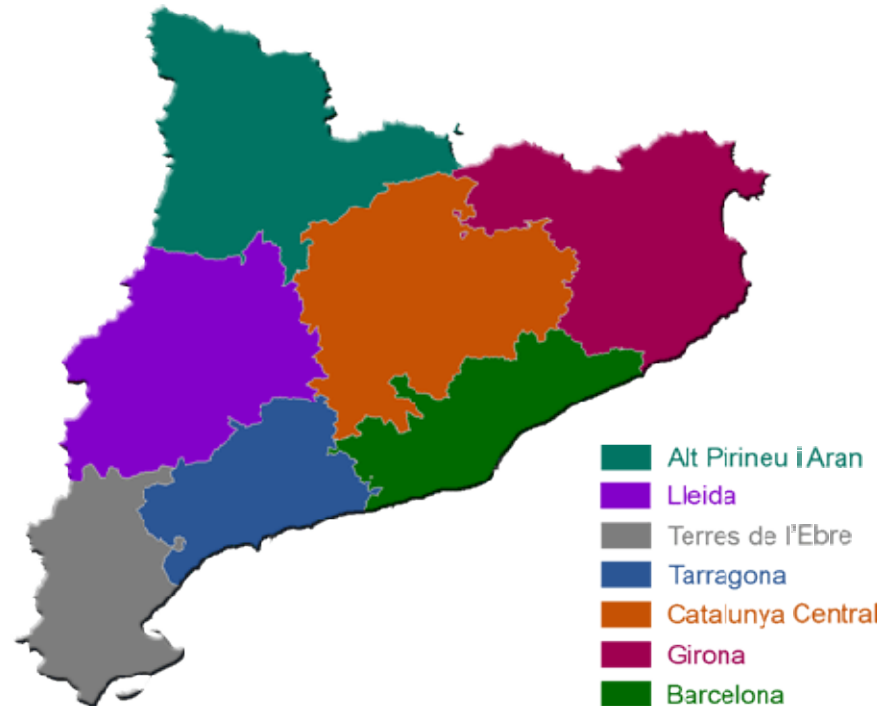
IDIAP main services

DEVELOPMENT OF RESEARCH

A. Organisation of research

B. Assessmen and management of projects

C. Development of support platforms

D. Information

E. Ethics Assessment

IDIAP Jordi Gol

INNOVATION

TRAINING
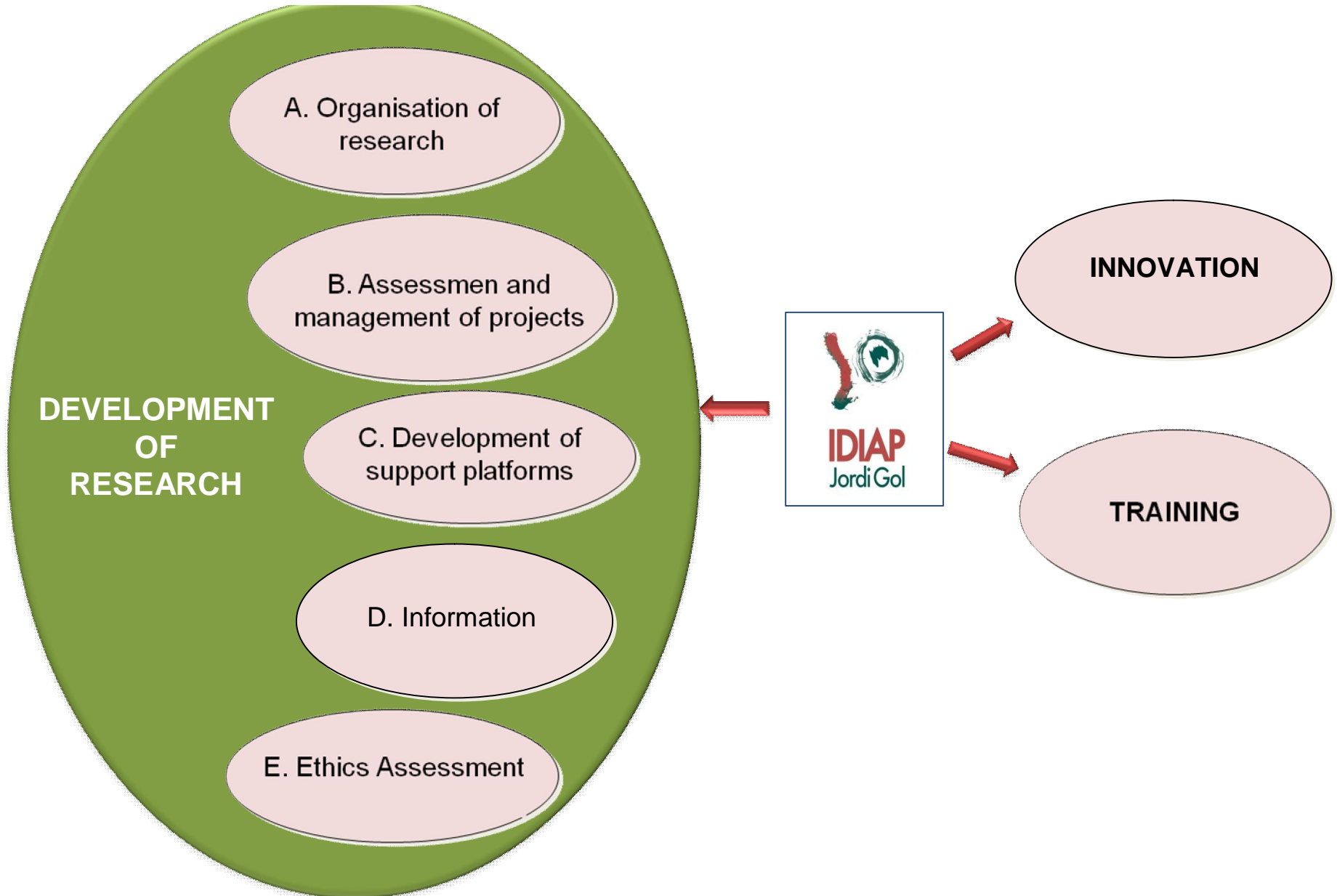
IDIAP Main Services
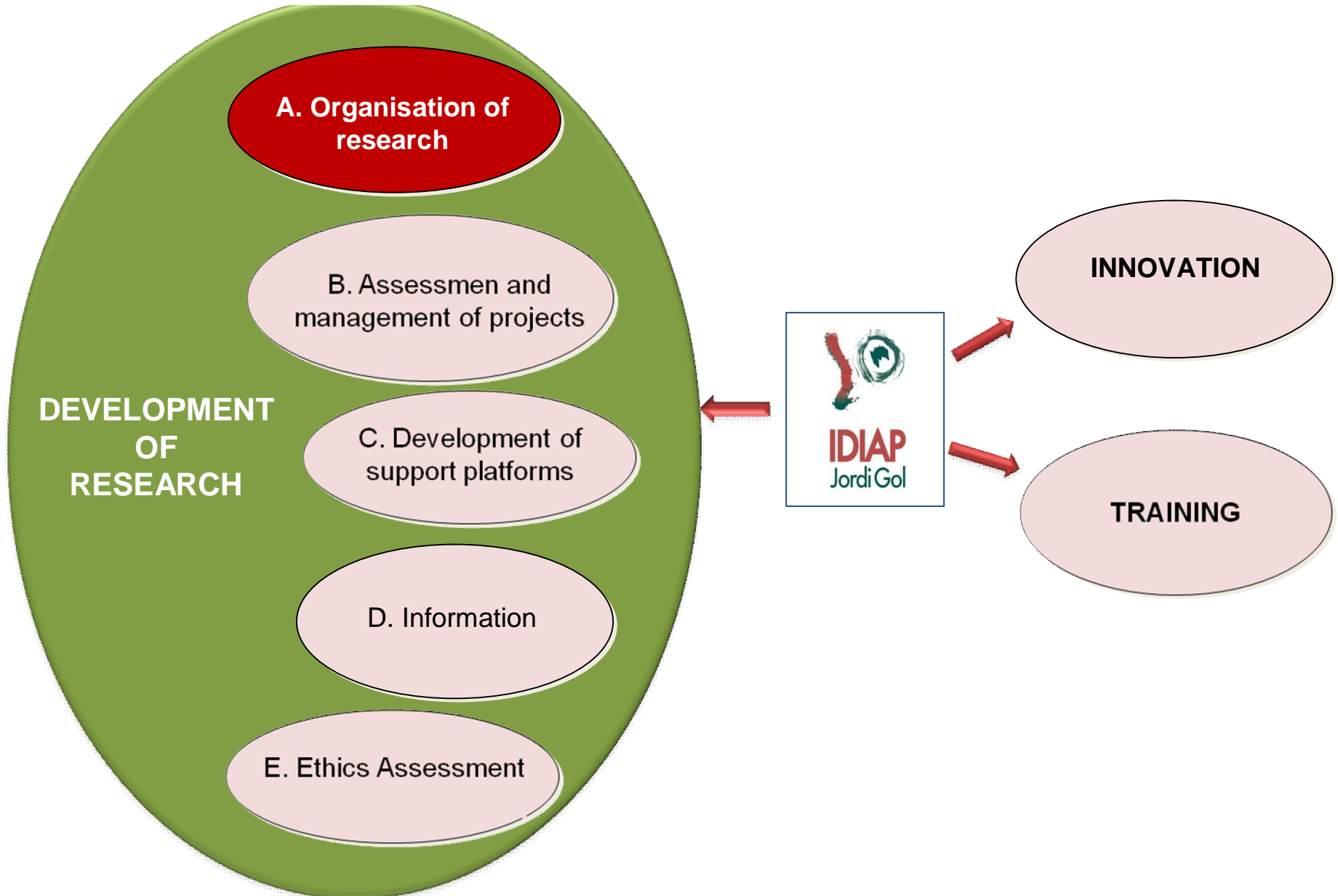
1. Decentralized organisation with 8 territorial units of support

To provide Territorial Units of Support to research at the different territorial areas of Catalonia in order to coordinate investigators, promote groups, assess the design of new projects, develop multi-centre projects and support the execution of the field work: 8 Units at present.

- Alt Pirineu i Aran
- Lleida
- Terres de l'Ebre
- Tarragona
- Catalunya Central
- Girona
- Barcelona

2. Promotion of research groups

	Girona	Metr. Nord	Bcn	Metr. Sud	Tarr-Reus	T. Ebre	Lleida	Cat Central	UR Central
Diabetis M			🟠		🟢				
Mental Health			🟠	🟠	🟢				
CV	🟢	🟢	🟠	🟠		🟠			
Life styles			🟠		🟠				
Infectious					🟢				
Respira-tory		🟠 🟠 🟠	🟠		🟠				
Health Services			🟠		🟠	🟠	🟠		🟢
Aging				🟠					
Other		🟢 🟠 🟠	🟠	🟠 🟠					

🟢 7 Consolidated   🟠 23 Emerging

3. Participation in research networks and European consortia

- Research networks:
  - Primary Care Prevention and Health Promotion Research Network (redIAPP) (RD06/0018) (RD12/0005): coordination of the network
  - Red de Cancer (RD12/0036)
  - RETICEF: Red Temática de Investigación Cooperativa en Envejecimiento y Fragilidad (RD06/0013)

  - Consortia or CIBER:
  - Obesity and Nutrition CIBER (CB06/003)
  - Epidemiology and Public Health CIBER (CB06/02)
  - Centro de Investigación Biomédica en Red de las Enfermedades Hepáticas y Digestivas (CIBERehd)

- To seek alliances and synergies with other national, European working teams to consolidate research lines and to participate in projects calls announced by the European Union.
  - Ex: eHID, DE-PLAN, CASE, PESCE, EURHOMAP, PHAMEU, APRES, LINNEAUS, QUALICOPC, ePREDICE

IDIAP Main Services

DEVELOPMENT OF RESEARCH

A. Organisation of research

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IDIAP Jordi Gol

INNOVATION

TRAINING
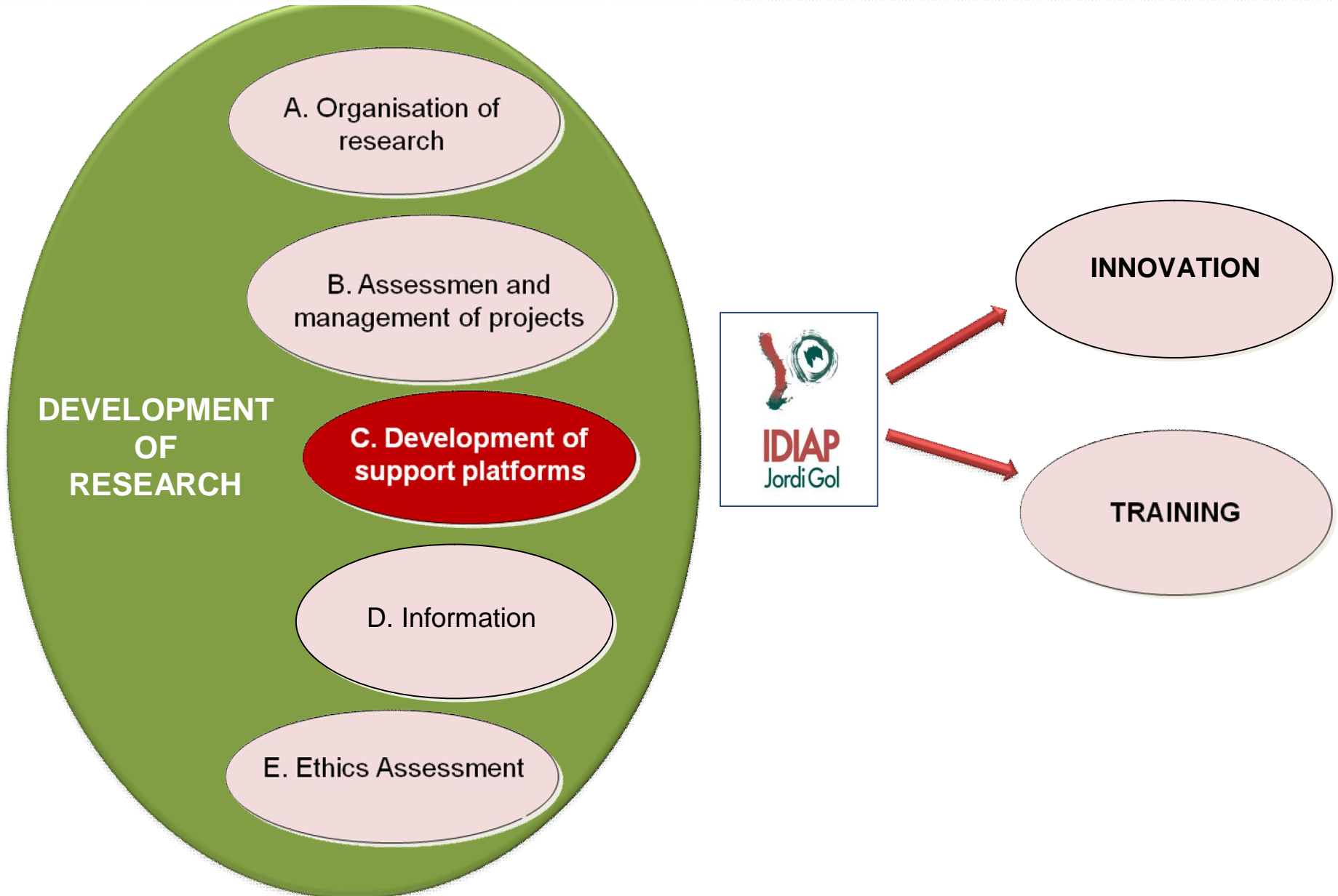
C.- Development of Support Platforms

1. SIDIAP (Information System for the Development of Research in Primary Care)

2. UEM (Unit of Medicine related Studies)

1. Information System for the Enhancement of Research in Primary Care

- Stores information from 274 Primary Care Centres in Catalonia, with a total population of 5.8 million people (80% of the Catalan population), since 2006.

- Available information: Socio-demographic data, clinical data, health problems, appointments, prescriptions, referrals, immunisations, lab test, *hospital admissions, Cause of death, other external databases*

SIDIAP

www.sidiap.org

2. Unit of Medicine Related Studies

Promotion and development of research on experimental drugs and other medicines

- Legal assessment and processing of the required authorisations and insurances
- Development of clinical trials, observational studies and other independent research
- Participation in the SCREN platform (Spanish Clinical Research Network)
- Creation of 6 clinical trial units
- Writing of Standard Operating Procedures to comply with Good Clinical Practice requirements
- Management of the AGICAP network (Network of health professionals involved in clinical trials)

Some results

Theses defended by researchers
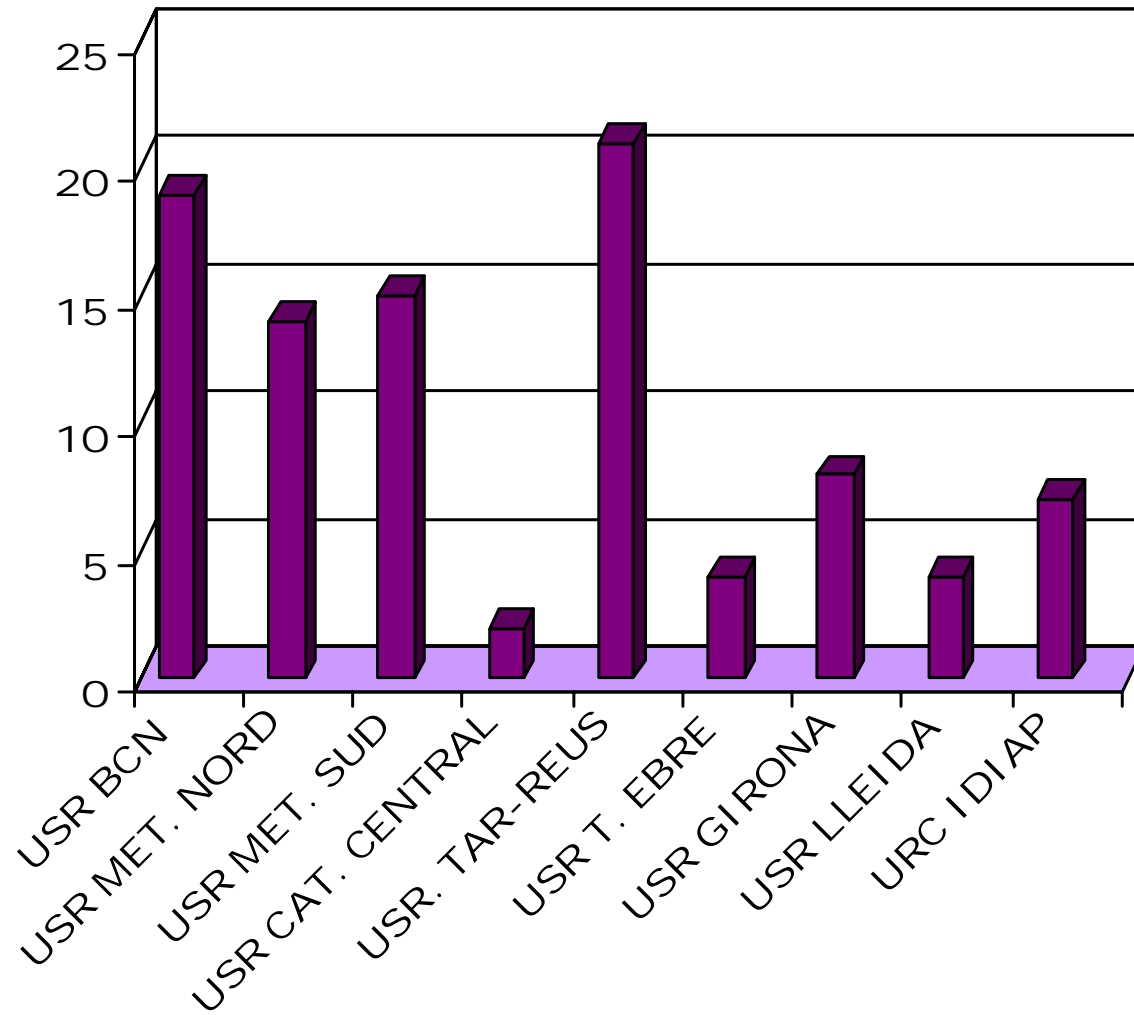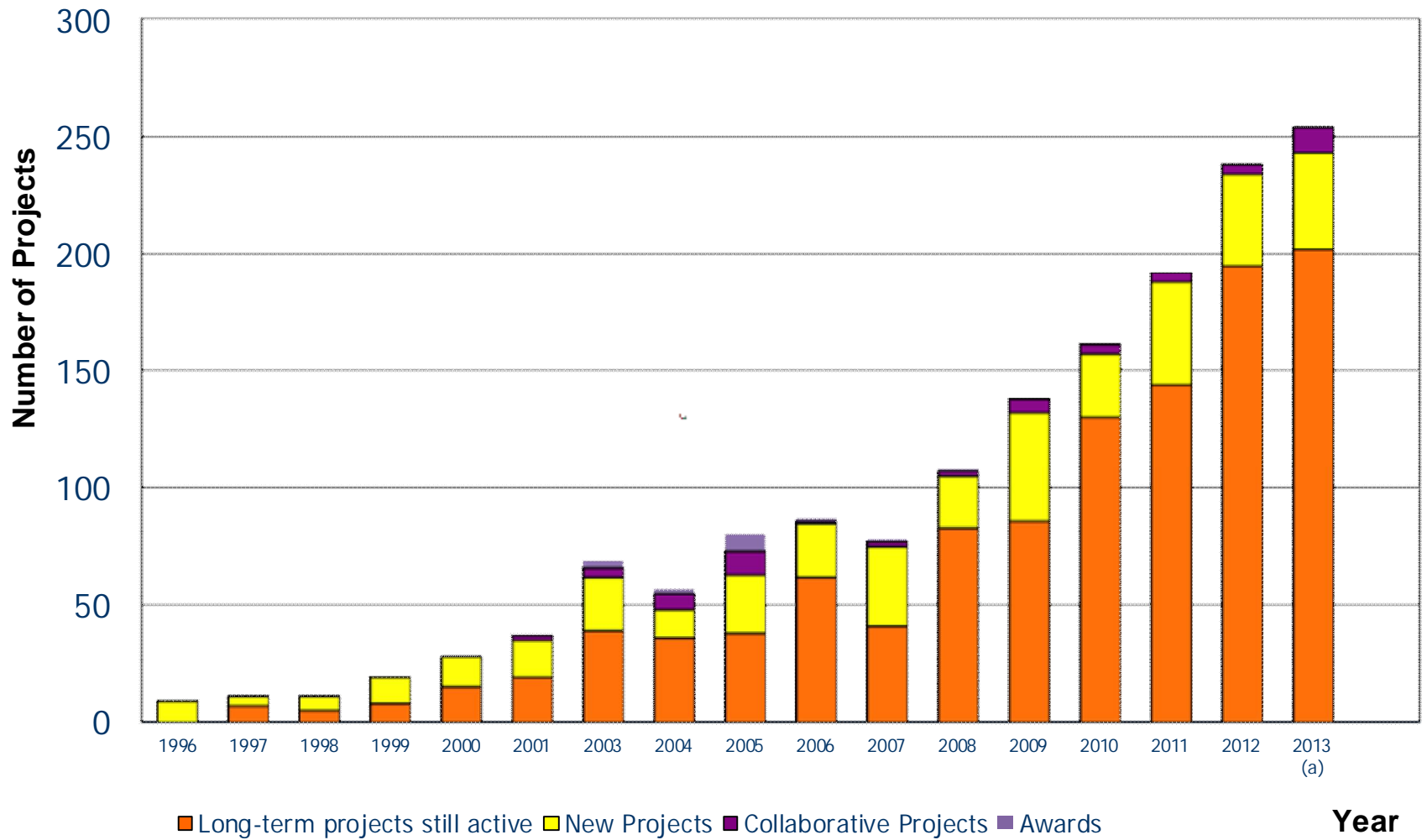
Projects
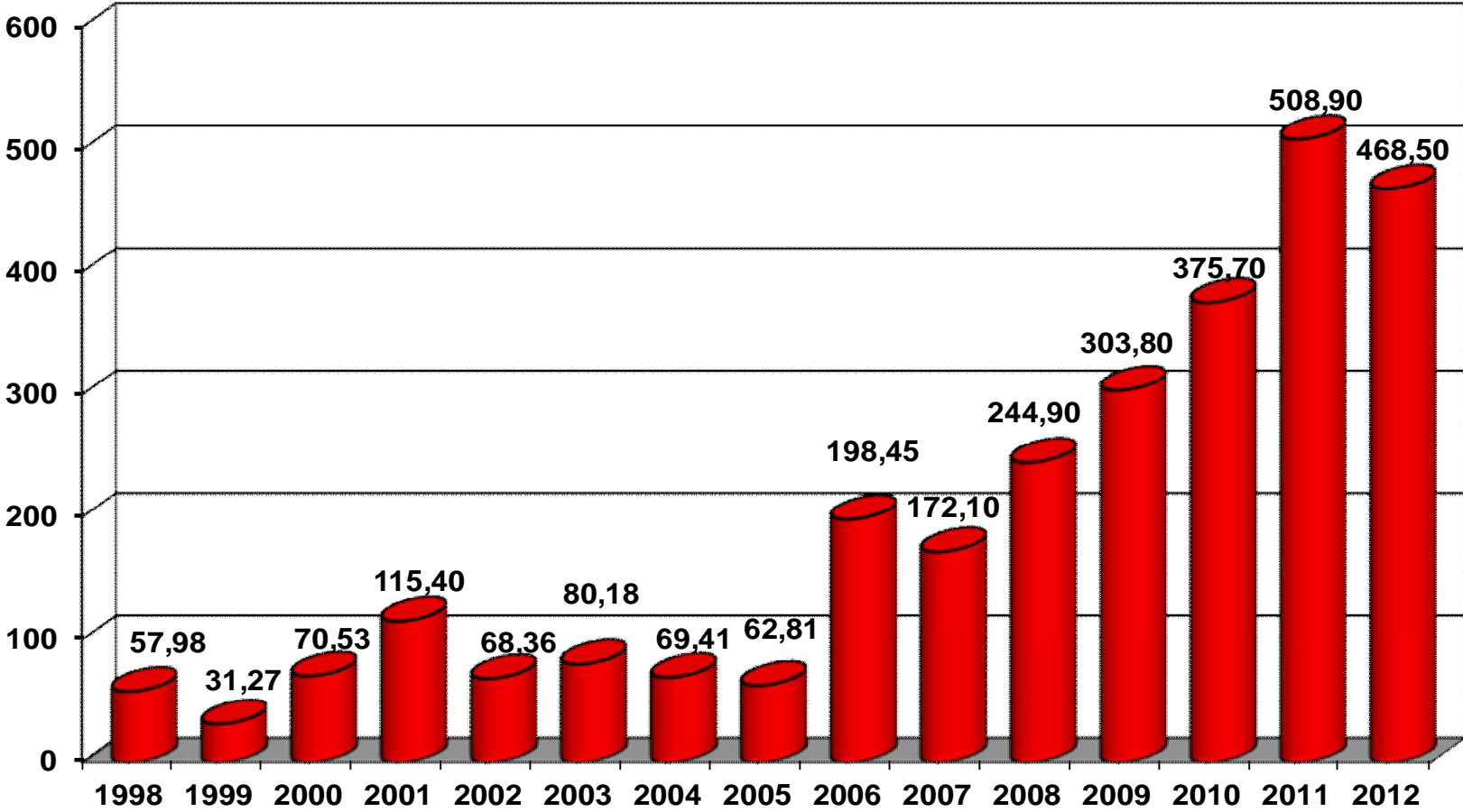
Key aspects to take into account in the development of PC research organizations in Spain

1. Specialized organization and independent to the health care ones
2. Close relationship with PC providers and health professionals
3. To cover wide territories. Not to fragment PC
4. Decentralized organization in order to be close to the health professionals
5. Strong organization with specialized support services and management required for competitive research.

Bolíbar B, Violan C. La organización de la investigación en la Atención Primaria. Rev Clin Med Fam. 2011;4:1-4.

Primary Care Prevention and Health Promotion Research Network (redIAPP)

r e d I A P P

Red de Investigación en Actividades Preventivas y Promoción de la Salud

www. redIAPP.org

Bolíbar B, Grandes G, Llobera J, Bellon J. La red de investigación en actividades preventivas y promoción de la salud: un reto para la atención primaria. [Editorial]. Aten Primaria. 2007;39(12):633-635.

García J, Magallón R, Bolíbar B, Martín A. Red de Investigación en Actividades de Prevención y Promoción de la Salud (REDIAPP). The spanish primary care collaborative research network (redIAPP): a model of research on psychiatry in primary care for export?. [Article original]. Primary Care and Community Psychiatry. 2007;12:131-135.

MISSION

RedIAPP is a network of research groups that aims to generate knowledge that will benefit Primary Care, particularly on new interventions in prevention and health promotion.

NETWORK COMPONENTS
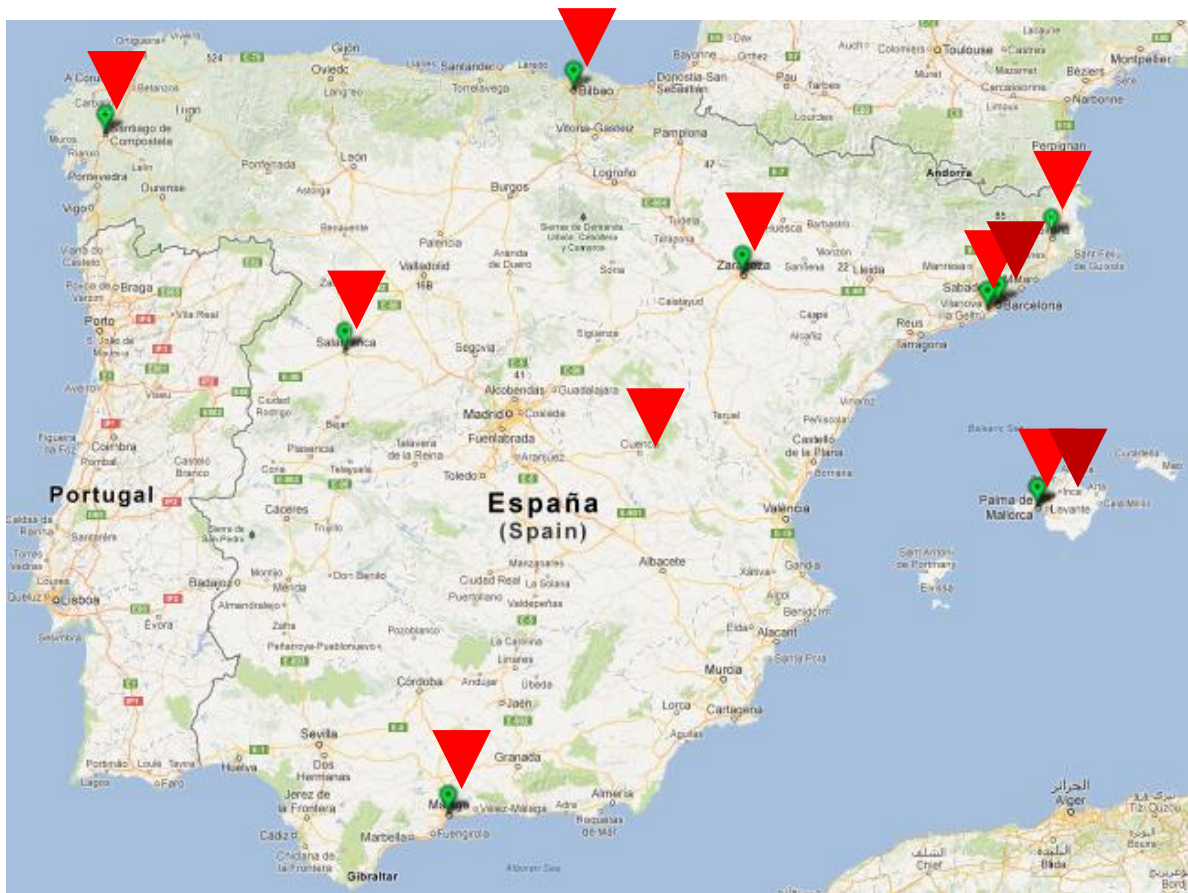
GROUP	Autonomus Community
SAMSERAP	Andalucía
SM-Aragón	Aragón
SM-Baleares	Baleares
ISS-Baleares	Baleares
PREVAF-CLM	Castilla-La Mancha
CV-CyL	Castilla-León
SM-SJD	Cataluña
GRenSSAP	Cataluña
CARDIOCAT	Cataluña
BIPS (Bizkaia)	País Vasco
Epidemiología-Galicia	Galicia

11 research groups from 8 autonomus communities

WORK PACKAGES

WP1. Healthy Lifestyles

WP2. Cardiovasvascular Risk

WP3. Cancer

WP4. Mental Health Disorders

WP5. Health Services Research

WP6. Multi-risk Clinical Trial

WP7. Innovation and transference

SOME RESULTS

WP1. Healthy Lifestyles

Smoking cessation

Diet

Physical Activity

Addiction
RESEARCH REPORT

doi:10.1111/j.1360-0443.2011.03491.x

Effectiveness of a stepped primary care smoking cessation intervention: cluster randomized clinical trial (ISTAPS study)

Carmen Cabezas[1], Mamta Advani[2], Diana Puente[2], Teresa Rodriguez-Blanco[2], Carlos Martin[2] & ISTAPS Study Group

Subdirecció General de Promoció de la Salut, Direcció General de Salut Pública Departament de Salut, Barcelona, Spain,[1] IDIAP Jordi Gol Barcelona, Spain[2] and

Recio-Rodriguez et al. Nutrition Journal 2014, **13**:37
http://www.nutritionj.com/content/13/1/37

NUTRITION JOURNAL

SHORT REPORT   **Open Access**

Association between fat amount of dairy products with pulse wave velocity and carotid intima-media thickness in adults

Jose I Recio-Rodriguez[1,4*], Manuel A Gomez-Marcos[1], Maria-C Patino-Alonso[2], Alvaro Sanchez[3], Cristina Agudo-Conde[1], Jose A Maderuelo-Fernandez[1], Luis Garcia-Ortiz[1] and on behalf of the EVIDENT Group

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ORIGINAL INVESTIGATION

Effectiveness of Physical Activity Advice and Prescription by Physicians in Routine Primary Care

A Cluster Randomized Trial

Gonzalo Grandes, MD, MS; Alvaro Sanchez, PhD; Ricardo Ortega Sanchez-Pinilla, MD; Jesus Torcal, MD; Imanol Montoya, MS; Kepa Lizarraga, MD; Javier Serra, MD; for the PEPAF Group

SOME RESULTS

WP2. Cardiovascular risk

Rafel Ramos ✉, Jose Miguel Baena-Díez, Miquel Quesada, Pascual Solanas, Isaac Subirana, Joan Sala, Maite Alzamora, Rosa Forès, Rafel Masiá, Roberto Elosua, María Grau, Ferran Cordón, Guillem Pera, Fernando Rigo, Ruth Martí, Anna Ponjoan, Carlos Cerezo, Ramon Brugada, Jaume Marrugat

WP3. Cancer

RESEARCH ARTICLE   **Open Access**

Factors related with symptom duration until diagnosis and treatment of symptomatic colorectal cancer

Magdalena Esteva[1*], Alfonso Leiva[1], María Ramos[2], Salvador Pita-Fernández[3], Luis González-Luján[4], Montse Casamitjana[5], María A Sánchez[6], Sonia Pértega-Díaz[3], Amador Ruiz[1], Paloma Gonzalez-Santamaría[3], María Martín-Rabadán[7], Ana M Costa-Alcaraz[8], Alejandro Espí[9], Francesc Macià[10], Josep M Segura[11], Sergio Lafita[12], Francisco Arnal-Monreal[13], Isabel Amengual[14], Marta M Boscá-Watts[9], Angels Hospital[10], Hermini Manzano[15], Rosa Magallón[16] and on behalf of the DECCIRE GROUP*

WP3. Mental Health

J. Á. Bellón[a1][c1], J. de Dios Luna[a2], M. King[a3], B. Moreno-Küstner[a4], I. Nazareth[a5], C. Montón-Franco[a6], M. J. GildeGómez-Barragán[a7], M. Sánchez-Celaya[a8], M. Á. Díaz-Barreiros[a9], C. Vicens[a10], J. A. Cervilla[a11], I. Švab[a12], H.-I. Maaroos[a13], M. Xavier[a14], M. I. Geerlings[a15], S. Saldivia[a16], B. Gutiérrez[a11], E. Motrico[a17], M. T. Martínez-Cañavate[a18], B. Oliván-Blázquez[a19], M. S. Sánchez-Artiaga[a20], S. March[a21], M. del Mar Muñoz-García[a22], A. Vázquez-Medrano[a7], P. Moreno-Peral[a23] and F. Torres-González[a11]
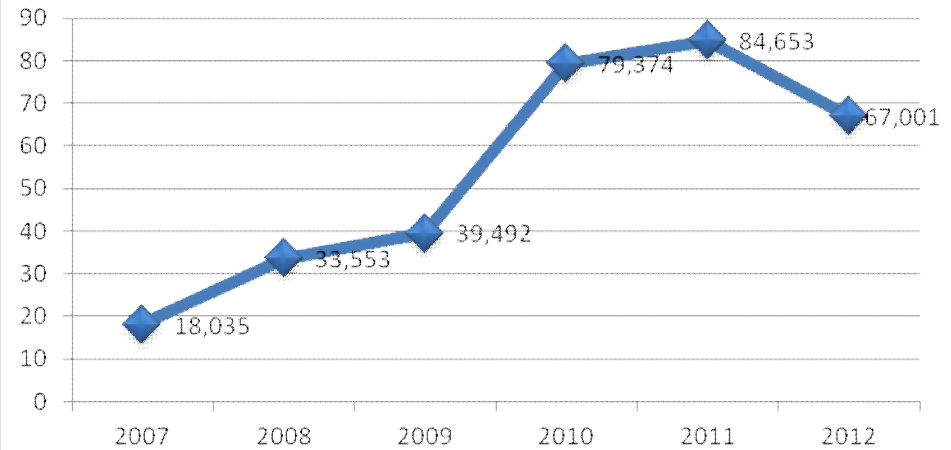
[a1] Centro de Salud El Palo, Unidad de Investigación del Distrito de Atención Primaria de Málaga (redIAPP, grupo SAMSERAP); Departamento de Medicina Preventiva, Universidad de Málaga, Spain;
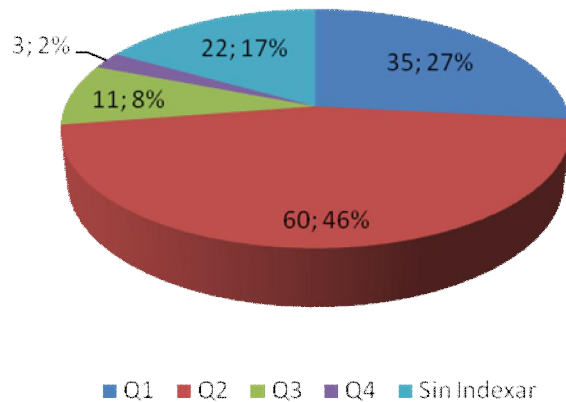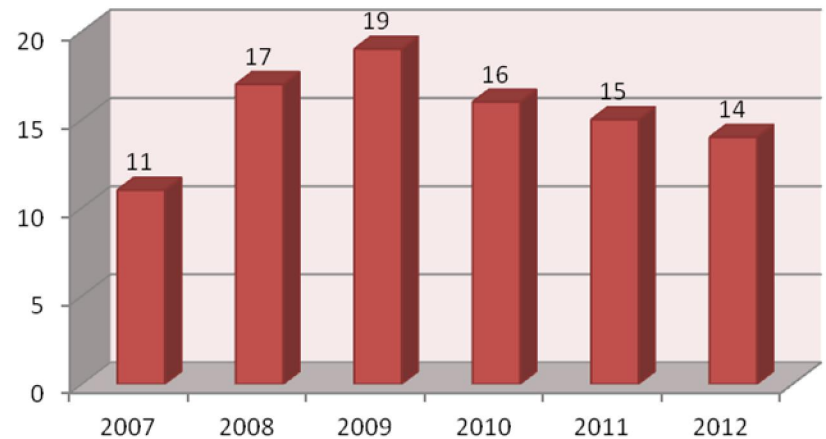
SOME RESULTS

Network Papers

2007: 7
2008: 13
2009: 16
2010: 33
2011: 35
2012: 27

IF Network

2007: 18,035
2008: 33,553
2009: 39,492
2010: 79,374
2011: 84,653
2012: 67,001

Papers by Quartiles

- Q1: 35; 27%
- Q2: 60; 46%
- Q3: 11; 8%
- Q4: 3; 2%
- Sin Indexar: 22; 17%

Network Projects

2007: 11
2008: 17
2009: 19
2010: 16
2011: 15
2012: 14
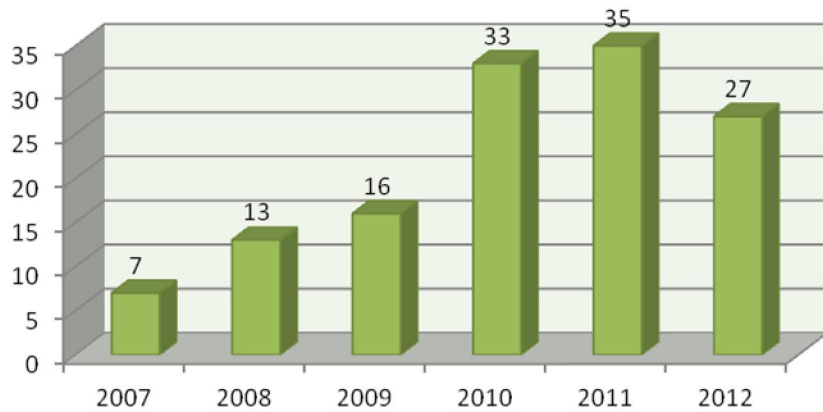
Strengths of the redIAPP

1. Unique collaborative research network related to primary care
2. Wide participation of different regions
3. Focused on a core topic for primary care and the National Health System: prevention and health promotion
4. Generation of new knowledge and evidences that can have a high impact on PC

Challenges for the Spanish Primary Care research

- ❑ Human resources: dual contracts have to be created
- ❑ Financial support: strategies to obtain more funds
- ❑ Participation in the financing bodies: participation in the design of public calls and in the evaluation of proposals
- ❑ Use the potential of Electronic clinical records and population-based databases that come from PC
- ❑ Participation in European organisations and European projects
- ❑ Greater integration of the postgraduate education of GP (Specialized Training Units) with the research centres
- ❑ Improve the translation and transference of the new knowledge produced to real practice
- ❑ The invasion of academia

Thank you for your attention,