



THE RATIONAL INQUIRER

Information for Inquiring Minds



CENTRE FOR STUDIES IN PRIMARY CARE
DEPARTMENT OF FAMILY MEDICINE

Heart and Stroke Foundation of Ontario Funds Primary Care Hypertension Research at Queen's

Heat and Stroke Foundation of Ontario (HSFO) has funded two primary care-based studies on hypertension. The Queen's University-based investigator group is led by Marshall Godwin and also includes Susan MacDonald, Ian Casson, Diane Delva, and Richard Birtwhistle of the Department of Family Medicine and Miu Lam of

the Department of Community Health and Epidemiology.

The studies are being conducted on hypertensive patients of family physicians in the Kingston area. The newly established Network for Studies in Primary Care (NSPC), a research network of family physicians, is crucial to the success of the projects. The NSPC is an arm of the Centre for

Studies in Primary Care (CSPC) in the Department of Family Medicine at Queen's University.

CSPC staff working on the projects include Rachelle Seguin, projects manager, Lucia Ruhland, projects field coordinator, and Jason Schmelzle and Chi Van as research assistants.

Outlines of the two projects follow are included in this issue..

Dr. Walter Rosser Wins 2002 Wood Award

The Department of Family Medicine at Queen's University is delighted that its new Professor and Head, Dr. Walter Rosser, was awarded the 2002 Wood Award at the meeting of the North American Primary Care Research Group (NAPCRG) in New Orleans in November. The Wood Award for Lifetime contribution to Primary Care Research is a prestigious award that honors an individual who has, over his

or her career, made an outstanding contribution to primary care research and related fields. The award is named in honour of Dr. Maurice Wood, an early leader in primary care research and founder of NAPCRG.

Below is an excerpt from the letter sent to NAPCRG nominating Dr. Rosser for the award.

"Dr. Rosser's CV speaks to the volume, diversity and quality of his work. It chronicles a career which

begins as a young family physician conducting research in a discipline that is just trying to find its feet. From simple beginnings you can watch his research develop as he collaborates with others, moves through different content areas, becomes involved in practice based networks, struggles with conceptualizing how technology can best be used in practice and in research, and realizes that family medicine must build its research capacity if it is to

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HSFO Funded Study: A Randomized Controlled Trial of the Effects of Home Blood Pressure Monitoring on Blood Pressure Control

Objective: to measure the effect of home (self) blood pressure monitoring (HBPM) on control of hypertension in a primary care setting.

Hypotheses: The main hypothesis of the study is that patients who use HBPM will have lower blood pressure levels than patients who receive usual care.

The secondary hypothesis is that HBPM changes physician and patient behaviours in ways that would result in better control of hypertension.

Study Design: Randomized controlled trial using cluster randomization to control for contamination bias. Physicians will be randomly allocated to

either have their patients use the intervention or to continue with usual care.

The intervention for the experimental group is the provision of a home blood pressure monitor to patients with a request that they record weekly blood pressure measurements and report them to their family physician at their regular hypertension follow-up visits. The physicians will be informed of current guidelines for target levels for home monitored blood pressure. The control group will receive usual care.

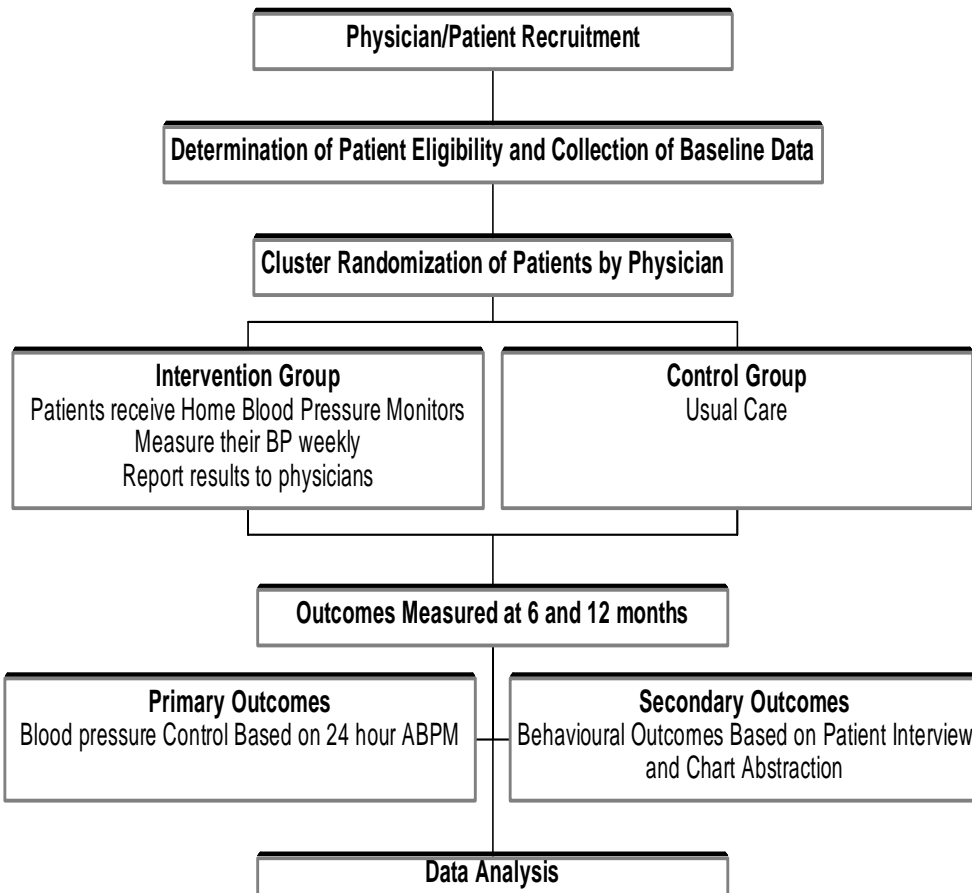
Outcomes: The main outcome measures will be blood pressure level (by 24 hour ambulatory monitoring) at baseline, 6 months and 12 months.

Behaviours that will be measured in-

clude the intensity and type of pharmacological treatment, compliance with antihypertensive medication and changes in patient's lifestyle.

Why this study is needed now.

- i) **lack of control of hypertension is common and is associated with morbidity and mortality.**
- ii) **home blood pressure monitoring is increasingly being used by patients.**
- iii) **guidelines for home blood pressure monitoring are already being developed and distributed.**
- iv) **there is currently conflicting or inadequate evidence that home monitoring is useful.**



Dr. Marshall Godwin models his CSPPC "power shorts". The boxer briefs, emblazoned with the CSPPC logo, were presented to him by his staff at the CSPPC one year celebration held at his home December 2002.

Recent Publications by Department Members

January 2001– December 2002

- Casson I, Godwin M, Brown G, Birenbaum A, Dhalla M. Does a third year of emergency medicine training make a difference? A historical cohort study of Queen's University graduates. *Can Fam Phys.* 2001;47:1227-1232.
- Delva MD, Tomalty L, Payne P. Fine Needle Aspiration of Breast Lumps. *Can Fam Phys.* 2002;48:1055-1056.
- Forster-Gibson C, Davies J, MacKenzie J, Harrison K. Cryptic duplication of 21q in an individual with a clinical diagnosis of Down syndrome. *Clinical Genetics* 59(6): 438-43, 2001.
- Forster-Gibson, CJ, Lee BA, Harrison, K, Holden JJA: Genetics in Mental Retardation in "Catalysts for Education in Developmental Disabilities", eds. Bruce D. McCreary, Patricia Peppin, Barbara Stanton. Published by Developmental Consulting Program, Kingston, ON. Fall, 2001.
- Frank C, Godwin M, Verma S, Kelly A, Birenbaum A, Seguin R, Anderson J. What drugs are our frail elderly patients taking? Do drugs they take or fail to take put them at increased risk of interactions and inappropriate medication use? *Can Fam Phys.* 2001;47:1198-1204.
- Godwin M, Hodgetts G, Bardon E, Seguin R, Packer D, Geddes J. Primary Care in Bosnia and Herzegovina. Health care and health status in general practice ambulatory care centres. *Can Fam Phys.* 47:289-297, 2001.
- Godwin M, Hodgetts G, Seguin R, MacDonald S. The Ontario Family Medicine Residents Cohort Study: factors affecting residents' decisions to practise obstetrics. *Can Med Assoc J.* 166 (2): 179-184, 2002.
- Godwin M. Hypothesis: The Research Page. Welcome to the Research Page. *Can Fam Phys.* 2001;47:121-122.
- Godwin M. Hypothesis: The Research Page. Odds ratios and relative risks. *Can Fam Phys.* 2001;47:574-576.
- Godwin M, Kargel CS, Alexander D. Case report: Patient's perspective on acute diabetic neuropathy. *Can Fam Phys.* 2001;47:1019-1020.
- Godwin M. Hypothesis: The Research Page. Confidence Intervals and P values. *Can Fam Phys.* 2001;47:1044-45.
- Godwin M. Canadian Institutes of Health Research: Family medicine success in the first CIHR competition. *Can Fam Phys.* 2001;47:1348-1349.
- Godwin M. Hypothesis: The Research Page. Part 3: Power, Sample Size, and Clinical Significance. *Can Fam Phys.* 2001;47:1441-1443.
- Godwin M, Dawes M. The Science and Art of Evidence Based Primary Care. *Can Fam Phys.* 2001;47:1527-30.
- Godwin M. Conducting a clinical practice audit. Fourteen steps to better patient care. *Can Fam Phys.* 2001; 47:2331-2333.
- MacDonald SE, Hartling LA, Seguin RM, Steel O'Connor K, Rekart LM, Mowat D, Hoey JR. Screening for HIV during pregnancy. Survey of Physicians' practices. *Can Fam Phys.* 2001;47:2250-2257.
- O'Connor KS, MacDonald SE, Hartling L, Seguin RM, Hollands H, Mowat DL, Hoey JR, Massé R, Rekart ML. The Influence of Prevalence and Policy on the Likelihood that a Physician will Offer HIV Screening in Pregnancy. *Can J Public Health.* 2002 Jan-Feb;93(1):31-35.
- O'Connor KS, MacDonald SE. Aiming for zero: preventing mother-to-child transmission of HIV. *CMAJ.* 2002 Apr 2;166 (7):909-910.
- Sempowski I, Godwin M, Seguin R. Physicians who stay versus physicians who go: results of a cross sectional survey of Ontario rural physicians. *Can J Rural Medicine.* 2002;7(3):173-179.
- Sempowski I, Brison R. Dealing with Office emergencies: A stepwise approach for family physicians. *Can Fam Phys.* 2002;48:1464-1472.
- Tromp M, Iglesias S. Discussion paper on rural obstetrical analgesia and anesthesia. *Can J Rural Med* 2001;6(4) 255-259.
- Wilson R, Godwin M, Seguin R, Burrows P, Caulfield P, Toffelmire T, Morton R, et al. End-Stage Renal Disease: factors affecting referral decisions by family physicians in Canada, the USA and Britain. *American Journal of Kidney Disease* 2001;38: 42-48.

Successful Grant Applications 2000-2002

PROJECT TITLE	PRIMARY INVESTIGATOR	CO-INVESTIGATORS	FUNDING AGENCY	FUNDS REQUESTED
An assessment of the relative value of ambulatory site characteristics and teaching behaviours by clinical clerks and residents in medical schools in Ontario	Karen Schultz	D Delva, M Godwin, R Birtwhistle, A Verma, J Kirby, C Knapper	Physician Services Incorporated	\$17,000 1 year
Ontario Registry for Studies of Familial Breast Cancer	L. Andrulius and N. Boyd	CJ Forster-Gibson & others across Canada	NIH	Renewal \$1.1 million per year for 5 years 2001-6
Ontario Registry for Studies of Familial Colon Cancer	S. Gallinger	CJ Forster-Gibson & others across Canada	NIH	Renewal 5 years 2002-2007
Assessment of the dissemination of critical appraisal skills to family physicians in Ontario	Marshall Godwin	Rachelle Seguin	PSI	\$25,000 1 year
A Randomized Controlled Trial of the Effects of Home Blood Pressure Monitoring on Blood Pressure Control	Marshall Godwin	R Birtwhistle, I Casson, D Delva, M Lam, S MacDonald	HSFO	\$250,000 2 years
An intensive scheduled management strategy for increasing blood pressure control in patients in primary care	Marshall Godwin	R Birtwhistle, I Casson, D Delva, M Lam, S MacDonald	HSFO	\$270,000 2 years
Molecular Cytogenetic Evaluation of Subtle Duplications using High Resolution Fiber FISH	K Harrison	CJ Forster-Gibson	OAML Research Trust Small Grant Program	\$34,908 1 year 2001-2002
Unraveling the mystery of autism: from genotyping and phenotyping to prospective identification and prevention	JJA Holden	CJ Forster-Gibson	CIHR IHRT Program	\$860,000 per year 5 years 2002-2006
Family Medicine Development Program in Bosnia and Herzegovina: Phase Two	P.G. Hodgetts		CIDA Contribution Agreement	\$2.5 million Sept. 2000–June 30, 2002
Peacebuilding Response Program: CIDA and Canadian Embassy Bosnia and Herzegovina. Family Medicine Teaching Center development in Republika Srpska	P.G. Hodgetts		CIDA PRP Grant	\$50,000
Peacebuilding Response Program: CIDA and Canadian Embassy Bosnia and Herzegovina. Family Medicine Teaching Center development in Federation BiH	P.G. Hodgetts		CIDA PRP Grant	\$36,000
Family Medicine Development Program for the Balkans Region: Phase Three	P.G. Hodgetts		CIDA Contribution Agreement	\$6 million Nov.15, 2001— June 30, 2004
The Development of a Curriculum on Advocacy in Health Care at the Post-graduate Level	Sarita Verma	Leslie Flynn	2002 RCPSC/AMS CanMEDS R & D grant	\$24,930 1 year

Educational Day 2002



Oral Presentations

"Electronic Medical Records in Canada – Looking Forward to a Paper Free You and Me"
DR. MARK CHANDRA

"Reclaiming a Shared Advanced Surgical Skills Set:
A Necessity for Rural Family Practitioners"
DR. TIMOTHY O'CONNOR

"Acceptability of Male Hormonal Contraception"
DR. STAN SPACEK & DR. KIM SPACEK

"Maternal – Child Outcomes in Home Births vs Hospital Births"
DR. SABINA IJAZ

"Decision: Impossible Career Choices and Medical Students"
DR. JEFFEY PARSONS-SHELDRAKE

"Ready For Sex? Sex Education in Medical School & Residency"
DR. ALANA SEROTA

"Anti-convulsants vs Anti-depressants in Neuropathic Pain"
DR. DAVID BILLINGS

"International Medical Graduates:
The Cure for Rural Family Medicine"
DR. YASAR RAZVI

"A Critical Appraisal of Treatment of Nocturnal Leg Cramps in the Elderly "
DR. SHIRIN MEHRAIN

"Gerd and Asthma – How Are They Related"
DR. NORMAN MAH

"Gender Difference in Emergency Treatment of
Acute Myocardial Infarction"
DR. BETH RUBENSTEIN

"Emergency Contraception: Why is it so Difficult to get a
Second Chance The Morning After?"
DR. MEGAN O'MALLEY

"How Do Parents Learn Parenting Skills?"
DR. LUCIE LAJOIE

"Adolescent Preventative Services: An Appraisal"
DR. AMANDA CHELIUS

"Ergogenic Aids in Primary Care: A Literature Review"
DR. KRIS WIEBE

Educational Day was held on February 28, 2002. This is the day when the second year residents present their resident projects. Dr. William Hogg from the Department of Family Medicine in Ottawa, attended as a guest participant. A committee of three (Dr. William Hogg, Dr. Moira McSween, and Dr. David Pinkerton) judged the best oral presentation and the best poster. The best poster was won by Dr. Aileen Gray for *Menopausal Symptoms: Are Natural Alternatives to Estrogen Effective?* and the best oral presentation was won by Dr. Elizabeth (Beth) Rubenstein for *Gender Difference in Emergency Treatment of Acute Myocardial Infarction*. Dr. Rubenstein also won the best Research Project which was judged after Educational Day by a different committee and was based on the written submission of her work. She was also awarded the *Janet Sorbie Award* for the best resident research project in women's health. As icing on the cake her project was one of five selected by the Faculty of Medicine for the 2002 PSI awards for resident research. Congratulations Beth!

Poster Presentations

"Physician Practices to Prevent Acute Mountain Sickness"
DR. DAVID BOTTEN

"The Truth about Popular Diets: Do They Work?"
DR. MARGARET CHU

"Alternative Therapies for Osteoarthritis:
A Literature Review"
DR. JINNY SHAW

"Comparison of DND vs Family Medicine Patient Profiles"
DR. WILLIAM RIDEOUT

"Alternative Therapies for Menopause"
DR. STACY VALIQUET

"Non Traditional Treatments for Migraine Headaches"
DR. SHERRY JAIN

"Angiotensin Receptor Blockers: Impact on Outcome in
Patients with Congestive Heart Failure"
DR. ADINA BIRENBAUM

"Menopausal Symptoms: Are Natural Alternatives to
Estrogen Effective?"
DR. AILEEN GRAY

"Referral Practices & Waiting Times at FMC since 1993"
DR. AHMAD HASSAN

"Opiate Use in Non-Malignant Pain "
DR. KEITH DYKE



Family Medicine Resident Dr. Lucie Lajoie and Dr. Judy van Stralen (Pediatrics) presented their research project as a poster at the 2002 Annual Scientific meeting of the European Society for Paediatric Research, held September 4-7 in Utrecht, The Netherlands. Their project was entitled "Should Children Come with an 'Owner's Manual'?"

Research Resumes in Bosnia and Herzegovina

Under the continued direction of Dr. Geoff Hodgetts, the Queen's University Family Medicine Development Program in the Balkans Region has entered its third phase of program activities. The Canadian International Development Agency has granted another \$5.9 million of program funding, for a total of approximately \$14 million since its inception in 1995, to continue Family Medicine development activities in Bosnia and Herzegovina (BiH) and to expand project activities into the Balkans region, particularly in Serbia and Montenegro.

With the addition in 2002 of a Research Associate to the project team, several research activities were conducted last year. The first is a study that looked at post traumatic stress disorder (PTSD) among family physicians. PTSD has been a much-researched topic among the military, refugees, and the general population of BiH, but has never been addressed among family physicians – those who are responsible for diagnosing and treating patients who may have PTSD. Our study objective was to determine the prevalence of PTSD among the Family Medicine residents and specialists of the Queen's Family Medicine Development Program, using a validated, self-administered questionnaire. The questionnaire was given to 147 physicians in June 2002, among which 133 responded (90%). Results show that some 18% of the physicians may have PTSD, according to the screening tool used which is based on the DSM-IV. Further analysis showed no significant associations between PTSD and age, sex, residence during the conflict, or whether they practised medicine

or not during the conflict. However, a question that was asked to those who experienced a traumatic event: "Do you think that the traumatic event still affects you today?" was shown to have a high degree of sensitivity and negative predictive value and may be of use as a screening tool for ruling out the presence of PTSD after a traumatic war experience.

A second study that was also conducted in June 2002 looked at smoking behaviour, knowledge and attitudes among health professionals. Few, if any, tobacco free initiatives have been launched in BiH, but it is expected that some smoking cessation programs will be established in the near future. Our study objective was to collect some baseline data on smoking behaviour among family physicians and nurses in the Queen's Family Medicine specialization program in BiH. The study also allows us to gain a better understanding of their knowledge and attitudes regarding adverse effects of smoking as well as the health professional's role in counselling patients about smoking. A WHO smoking questionnaire for health professionals was used in this study and was distributed to Family Medicine physicians and nurses at the 19 Family Medicine Training Centres in BiH. There were 205 respondents out of 263 for a 78% response rate. Results showed that 40% of physicians currently smoke and 50% of nurses smoke, which is significantly higher than rates in Canada. When combining current and former smokers, rates go up to 54% and 72% for physicians and nurses respectively. Many additional findings will be presented in the final manuscript.

Future studies include a possible prevalence study of mental illness

Evidence Based Whodunit Hits the Press!!



Apart from traveling Europe and refining his skills as a specialist in evidence-based medicine, Dr. Marshall Godwin wrote a mystery book on his sabbatical. "The Bedford Murder: An Evidence-Based Clinical Mystery" will be released in March 2003. To reserve your copy before Chapters/Indigo sells out, simply send a cheque for \$1,099.00 made out to "Centre for Studies in Primary Care." Joking of course, but would be gratefully accepted nonetheless!

in people attending ambulatory care centres in BiH and a program evaluation of the new Program for Additional Training (PAT) in Family Medicine. The PAT began in the fall of 2002 and consists of a 40-week intensive curriculum of clinical skills and family practice methods for general practice physicians and nurses.

*Teresa Broers
Research Associate
Balkans Family Medicine Project*

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compete for limited research funds. His academic career grows as he becomes Professor and Chair of the Department of Family Medicine in Ottawa, then at McMaster, then Toronto, and now most recently at Queen's University in Kingston. In each department he builds research capacity and serves as a model for faculty members, residents, and students looking to become primary care researchers. Overlying all of this is his work in the political arena provincially, nationally, and internationally, always with the agenda of furthering the cause of family medicine through capacity building. Internationally, he has spoken and taught worldwide on primary care topics and more recently on evidence-based medicine. He has written a textbook on evidence-based family medicine and developed online courses on research methods and evidenced based medicine. One cannot help being impressed thinking of the energy and productivity of this man who has made family medicine, and especially family medicine research, his life's work."



Dr. Maurice Wood and Dr. Walter Rosser with the Maurice Wood Award at the 2002 NAPCRG conference.

UPCOMING CONFERENCES

NAPCRG 2003

October 25th—28th, 2003
Fairmont Banff Springs, Alberta, Canada
Website: <http://www.napcr.org/>

NAPCRG 2004

October 10th—13th, 2004
Wyndham Orlando Resort, Orlando, Florida
Website: <http://www.napcr.org/>

17th Wonca World Conference

October 13th—17th, 2004 Orlando Florida, USA
Theme: Family Medicine - Caring for the World
Website: www.Wonca2004.org

6th Wonca Rural Health Conference

Santiago de Compostela, Spain
Date: 24—27 September 2003
Venue: Palacio de Congresos de Galicia
Theme: Rural Health in a Changing World
Website: www.ruralwonca2003.net

Family Medicine Forum 2003

October 23rd—25th, 2003
Telus Convention Centre
Calgary, Alberta

Visiting PhD Nutritionist Researcher

Marieke Verheijden, a PhD nutritionist researcher, has been at the Family Medicine Centre working within the Centre for Studies in Primary Care since late May 2002. We invited her to introduce herself to our readers.



"As I have been working at the Centre for Studies in Primary Care for several months, I'll gladly take the opportunity to introduce myself and my study to the readers of *The Rational Inquirer*."

"After obtaining an MSc degree in Nutrition and Health from Wageningen University in The Netherlands, I started my PhD on a project called 'Web-based nutrition counseling and social support for patients at elevated cardiovascular risk in family medicine'. Among the many reasons for conducting an intervention study in Canada instead of The Netherlands is the fact that Canada has a higher percentage of people with Internet access than anywhere else in the world. The intervention during the study will involve patients logging on to a website that was designed for

the study. The site will then provide patients with 'tailored' nutrition counseling based on the Stages of Change Model. The site also provides patients with heart-healthy recipes, a tool they can use to assess their dietary habits, and a bulletin board they can use to interact with other patients. We hope to find differences between the intervention group and the control group in several physiological and psychosocial outcomes."

"14 physicians in the Family Medicine Centre gave me permission to invite their patients to participate in my study. I am very much looking forward to working in Canada the rest of the year." Marieke Verheijden

Recent Grant Submissions

- Brown Ann.** *Effects of Low-Intensity Exercise Conditioning on Blood Pressure, Heart Rate, and Baroreflex Sensitivity in Men and Women with Mild Hypertension.* Co-investigators: Godwin M, Lam M, Adams M, Abdollah H, Ogunyankin K, Parlow J. Heart and Stroke Foundation of Ontario. \$149,584, 2 years.
- Chen, Ben.** *Improving adherence to clinical practice guidelines through networked patient education kiosks.* Co-investigators: Godwin M, Rosser W, Shortt S, Tomalty L. Heart and Stroke Foundation of Ontario. \$56,485, 1 year.
- Delva D.** *Implementation of Hypertension Guidelines in Primary Care: The effect of the physician's Approaches to Learning in the Workplace, conviction and confidence and educational intervention on guideline implementation.* Godwin M, Kirby J, Tomalty L, Birtwhistle R. CIHR. Operating Grant. \$123,851, 2 years.
- Delva D.** *Implementation of Hypertension Guidelines in Primary Care: The effect of the physician's Approaches to Learning in the Workplace, conviction and confidence and educational intervention on guideline implementation.* Godwin M, Kirby J, Tomalty L, Birtwhistle R, Knapper, C. Heart and Stroke Foundation of Ontario. \$116,801, 2 years.
- Feldman M, Holden JJA.** *HEIDI: Healthcare Equity for Intellectually Disabled Individuals.* Co-investigator: Forster-Gibson CJ. et al. CIHR. Reducing Health Disparities & Promoting Equity for Vulnerable Populations Program \$100,000, 2003-2004.
- Gallinger S.** *Ontario Registry for Studies Colon Cancer.* Co-applicant: Forster-Gibson CJ. NIH, 5 years.
- Godwin M.** *Blood Pressure Control in Primary Care: Underlying Mechanisms, Clinical Management, and Health Policy.* Co-investigators: Adams M, Brown A, Chen B, Delva D, Katzmarzyk P, MacDonald SE, Ogunyankin K, Ross R, Shortt S. Heart and Stroke Foundation of Ontario. \$1,154,404, 5 years.
- Godwin M.** *Clinician Investigator Program in Primary Care.* Co-investigators: Shortt S, Mackillop W, Rosser W, Lam M, Brown G, Verma S, Stuart H. Submitted to CIHR Strategic Training Initiative after successful Letter of Intent. \$1,287,774, 5 years.
- Holden JJA.** *Mobile Laboratories for Clinical and Behavioural Phenotyping of Families with Autism Spectrum Disorders.* Co-investigator: Forster-Gibson CJ. Canadian Foundation for Innovation. \$600,000.
- Holden JJA.** *Autism Spectrum Disorders: Novel Approaches for Identifying Genetic and Environmental Factors.* Co-investigator: Forster-Gibson CJ. et al. Canadian Institutes of Health Research. \$100,000, 2003-2004.
- Holden JJA.** *Transdisciplinary Inter-Institute Training Program in Autism Spectrum Disorders.* Co-investigator: Forster-Gibson CJ. et al. Canadian Institutes of Health Research Strategic Training Program \$300,000, 2003-2004.
- MacDonald, Susan E.** *Gestational Hypertension: Identification and follow-up of women at risk for the development of essential hypertension.* Co-Investigators: Godwin M, Smith G. CIHR. \$104,640, 2-1/2 yrs.
- MacDonald, Susan E.** *Gestational Hypertension: follow-up of women at risk.* Co-investigators: Godwin M, Smith G. Heart and Stroke Foundation of Ontario. \$543,117, 3 years.
- Ogunyankin K.** *A Randomized Controlled Trial of Intensive versus Usual Therapy of Hypertension Examining the Effect of Blood Pressure Control on Diastolic Function and Left Ventricular Mass as Assessed by Echocardiography.* Co-investigators: Godwin M, Lam M, Sanfilippo AJ. Heart & Stroke Foundation of Ontario. \$252,410. 3 years.
- Ouellette-Kuntz H.** *Enhancing Undergraduate Education in Intellectual Disabilities for the Health Professions.* Co-investigator: Forster-Gibson CJ. AMS GIA. \$50,000, 2 years.
- Ross, Bob.** *Prevention and Reduction of Obesity through Active Living (PROACTIVE): An Effectiveness Trial.* Co-investigators: Godwin M, Levesque L, Katzmarzyk P, Dunn A, Blair S. Submitted Jan 2003 to CIHR New Emerging Team Initiative in Obesity Research after successful Letter of Intent. \$1.5 Million, 5 years.
- McCull M.** *Reducing inequities in access to primary care and preventive services.* Co-investigators: Stienstra D, Boyce W, Godwin M, Havens B, Kaufert J, Krogh K, Shortt S. CIHR. \$99,000, 1 year.
- Shortt, Samuel.** *Quality of Care for Hypertension: A comparison of three payment models in primary care.* Co-investigators: Godwin M, Rosser W. Heart & Stroke Foundation of Ontario. \$91,116, 1 year.

IN PRESS! Articles Accepted for Publication

- Campbell S, Delva MD. Physician Do Not Heal Thyself: A Survey of the Personal Health Practices of Medical Residents. *Canadian Family Physician*.
- Delva MD, Knapper C, Kirby J, Birtwhistle R. Approaches to Learning in Professional Practice-Implications for Continuing Medical Education: Survey of Ontario Physicians. *British Medical Journal*.
- Kirby, John R, Delva, Dianne M, Knapper, Christopher, and R. V. Birtwhistle. Development of the Approaches to Work and Workplace Climate Questionnaires for Physicians. *Evaluation and the Health Professions*.
- O'Connor KS, MacDonald SE, Hartling L, Seguin RM, Hollands H, Mowat DL, Hoey JR, Massé R, Rekart ML. The Influence of Prevalence and Policy on the Likelihood that a Physician will Offer HIV Screening in Pregnancy. *Can J Public Health*.
- Phillips, SP. Evaluating Women's Health and Gender. *American Journal of Obstetrics and Gynecology*.
- Sempowski I, Houlden R. Diabetes in pregnancy: a guide for family physicians. *Canadian Family Physician*.

Articles Submitted to Journals

- Brown G, Godwin M, Seguin R, Ashbury EL. Family Medicine Anaesthesia: Sustaining a Pivotal Service. *Canadian Family Physician*.
- Casson RI, King WD, Godwin NMS, Petrella R. Physical activity, cardiorespiratory fitness and loss of control of hypertension. *Canadian Journal of Cardiology*.
- Casson RI, King WD, Godwin NMS. Markers of loss of control of hypertension. *Canadian Family Physician*.
- Godwin M, Seguin R, MacDonald S, McCall M. A randomized controlled trial comparing an email survey method with a postal survey method. *Canadian Family Physician*.
- Godwin M, Dawes M. Intra-articular corticosteroid injection for painful osteoarthritis of the knee. A systematic review with meta-analysis. *CMAJ*.
- Godwin M, Hodgetts G, MacDonald S, Seguin R. The Ontario Family Medicine Residents Cohort Study: Practice Choices of Residents Graduating in 1998 and 1999. *CMAJ*.
- Hodgetts G, Broers T, Godwin M. Smoking Behaviour, Knowledge and Attitudes among Family Medicine Physicians and Nurses in Bosnia and Herzegovina. *European Journal of General Practice*.
- Hodgetts G, Broers T, Godwin M, Bowering E, Hasanovic M. Post Traumatic Stress Disorder Among Family Physicians in Bosnia and Herzegovina. *Family Practice International*.
- Hunter D, Shortt S, Walker P, Godwin M. Family physician views about primary care reform in Ontario. *CMAJ*.
- Sempowski I. The effectiveness of financial incentives in exchange for rural return of service commitments: Systematic review of the literature. *Canadian Family Physician*.
- Shortt S, Godwin M. The Effect of Payment Method on Quality of Patient Care in an Academic Family Practice Setting. *Annals of Family Medicine*.

HSFO Funded Study: An intensive scheduled management strategy for increasing blood pressure control in patients in primary care

Background:

Hypertension is poorly controlled in primary care; studies have revealed that 60% of hypertensive patients have not achieved recommended target blood pressure levels. We postulate that the usual non-intensive approach to hypertension management, where coming close to the target is often accepted as ‘good enough’, leads to a large percentage of patients in a physician’s practice being ‘out of control’ when measured at a given point in time. By intensifying treatment and aggressively trying to achieve the target blood pressure, the proportion of patients out of control at a given point in time will be significantly less. If we show this to be the case, then clinical practice guidelines, can not only recommend the types of medications that should be used, they can also recommend a process by which these medications could be prescribed to achieve optimal success.

Primary Research Question:

Does intensive scheduled management (ISM) of hypertension result in short-term and longer-term improvement in blood pressure control in hypertensive patients compared to usual care?



Secondary Research Questions:

- i) Does ISM of hypertension result in improved quality of life compared to usual care?
- ii) Does ISM of hypertension result in improved medication compliance compared to usual care?
- iii) Does ISM of hypertension lead to increased rates of side effects compared to usual care?

Methods:

We are conducting a randomized controlled trial comparing intensive scheduled management (n=315 patients) of hypertension in the primary care setting with usual management of hypertension (n=315 patients) in the primary care setting. ISM will involve the adjustment of medications every 2 weeks for 16 weeks to achieve target office blood pressure levels over a short period. Usual management is the individual family physician’s approach to managing hypertension. Blood pressure control will be confirmed using 24 hour ambulatory monitoring (ABPM) at 16 weeks. Maintenance of control will be determined through repeat 24 hour

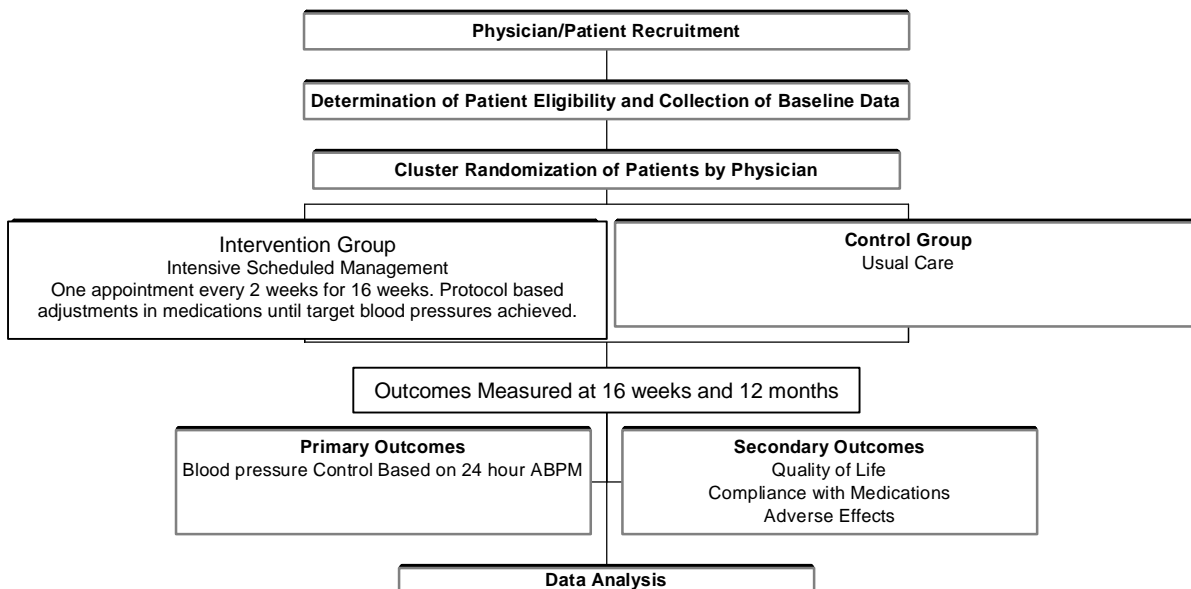
monitoring at 12 months post enrolment into the study. Randomization is by physician. Blinding will not be possible for either the physicians or for the patients but data collectors and those doing the data analysis will be blinded.

Primary Outcomes:

24-hour ABPM will be performed on each of the patients, in both groups at 16 weeks and 12 months. Two continuous variables, the mean daytime systolic blood pressure and the mean daytime diastolic blood pressure, will be used as outcomes. As well, the determination of whether or not the target for the mean daytime systolic blood pressure (<135mm Hg) and the mean daytime diastolic blood pressure (<85 mm Hg) have been achieved will be used as a dichotomous outcome. These levels are based on current Canadian guidelines for target blood pressures when using 24-hour ABPM.

Secondary Outcomes:

- i) Quality of Life: An assessment of quality of life is included to determine whether the intervention, ISM, affects the individual’s perception of quality of life. The Medical Outcome Study Short Form 36 (MOS-SF-36) is a well validated tool, tested in hypertension and has the advantage of comparison to general populations.
- ii) Medication Compliance using pills counts, and
- iii) Adverse Effects using questionnaire and assessment of blood parameters.





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