



## EUROPEAN UNION OF GENERAL PRACTITIONERS

Alment Praktiserende Lægers Europæiske Organisation – UEMO  
European Union of General Practitioners – UEMO  
Europäische Vereinigung der Allgemeinärzte – UEMO  
Union Européenne des Médecins Omnipraticiens – UEMO  
Unione Europea dei Medici di Medicina Generale – UEMO  
Europese Huisartsen Vereniging - UEMO  
Unión Europea de Médicos Generalistas – UEMO  
Uniao Europeia de Clínicos Gerais – UEMO  
Euroopan Yleislääkärjärjestö – UEMO  
Europeiska Allmänläkarorganisationen – UEMO



# UEMO 2001/099

### Minutes of the UEMO Working Group on Quality Assurance Crowne Plaza, Malta 15th June 2001

**Chairman:** Dr Mateja Bulc (SLO)  
**Rapporteur:** Dr John Chisholm (U.K.)  
**Present:** Mateja Bulc (chairman, Slovenia), John Chisholm (rapporteur, United Kingdom), Merte Bosch (Germany), Isabel Chaves (Portugal), Lynda Hamilton (Ireland), Steinunn Jonsdottir (Iceland), Martin Junker (Germany), Ute Leutloff-Simons (Germany), Aldo Lupo (Italy), Antoon Malfliet (Belgium), Daniel Mart (Luxembourg), Bryan Flores Martin (Malta), Raffaella Michieli (Italy), Fatima Oliveira (Portugal), Otto Pjeta (Austria), Hartmut Seifert (Switzerland), Tineke Slagter-Roukema (Netherlands), Maximilian Zollner (Germany)

#### **1 Minutes of last meeting, 13 October 2000 (agenda item 1)**

Received: Minutes of Quality Assurance Working Group, 13.10.2000 (UEMO 2000/174)

The minutes of the last meeting were received.

#### **2 UEMO/ESGP/FM Barcelona meeting, 12-13 October 2001 (agenda item 2)**

Considered: The UEMO statement on quality issue in general practice (UEMO 2001/147)

Mateja Bulc (Slovenia) referred to the suggestion made at the last meeting that she, Frede Olesen, Chris van Weel and possibly Philip Evans should produce a first draft of a new statement on quality assurance, to be circulated to the Working Group by e-mail, revised, presented to the current meeting of the Working Group and approved by the Plenum. She reported that a meeting of all the European GP organisations, organised by ESGP/FM and EurACT, was to be held in Barcelona on 12 and 13 October, with the aim of producing a document on the core content of general practice. UEMO had been invited to send five representatives, but it had been agreed at the previous day's meeting of the Presidency that she should attend as an observer.

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UEMO – PRESIDENCY

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A draft document on the core content had already been produced, which would be circulated to the Working Group. A final draft would be produced by the end of the Barcelona meeting, which would be circulated in late October or November for consultation. The final approved statement would be presented at the WONCA Europe meeting in June 2002. In view of this process, it would be inappropriate for the Working Group to finalise the UEMO statement on quality issue in general practice at a time when a common draft reflecting the views of all organisations was being produced, although e-mail comments on the UEMO draft statement would be welcome. That statement would be used in the Barcelona discussions.

Merte Bosch (Germany) reported that Thomas Lipp (Germany) had asked for the inclusion of references to the need for improved counselling techniques in p.1 para.5 and in one of the lists on p.3 of the document.

John Chisholm (United Kingdom) asked for clarification of the process of approval and ratification of the EurACT document. Mateja Bulc (Slovenia) said that the intention was to present the document to all other European GP organisations for discussion between October 2001 and June 2002, so that their views could be taken into account in the final version.

Merte Bosch (Germany) asked how GPs could practise evidence-based medicine. They could not compare research studies, because of a lack of data and time and the complexity of the cases they saw. Mateja Bulc (Slovenia) said that tutors in general practice taught GPs about the evaluation of evidence, although this was difficult in day-to-day practice. Antoon Malfliet (Belgium) said that the experience from twelve years of peer review in Belgium was that guidelines were inappropriate, because the research from which they derived had been carried out in hospital. Research studies by practising GPs were required.

Tineke Slagter-Roukema (Netherlands) said that almost seventy guidelines had been produced in the Netherlands. Last year the Dutch guidelines had been awarded a prize in Germany. However, they were hard to use in practice because of a lack of time, assistance and money.

John Chisholm (United Kingdom) summarised the discussion thus far. There was a need for research in a community setting. Guidelines required infrastructure, support staff and resources. They were also time-consuming, whilst GPs were already working under considerable time pressure. He said that the Netherlands had perhaps the greatest experience in the production and use of guidelines. In England and Wales, the National Institute for Clinical Excellence (NICE) issued approved guidelines, either by commissioning research or metaanalysis, or by endorsing existing guidelines. In Scotland, the Scottish Intercollegiate Guidelines Network (SIGN) promulgated guidelines. The *British Medical Journal* published *Clinical Evidence* twice a year, a book of perhaps 700 pages, which was now being distributed to all GPs. The *BMJ* was also contemplating setting up an advisory service on evidence-based medicine. However, even the enthusiasts did not believe that it was possible to follow guidelines in more than 80 per cent of cases, not least because they might not apply to patients with multiple pathologies. The greatest problem GPs faced in implementation was lack of time.

Daniel Mart (Luxembourg) doubted that GPs would have the time to read *Clinical Evidence* from cover to cover, but John Chisholm (United Kingdom) and Mateja Bulc (Slovenia) said that it was intended as a reference book. Lynda Hamilton (Ireland) referred to the plethora of guidelines available, and the consequent problem of knowing which to follow. She paid attention to those produced by the Irish College of General Practitioners. Martin Junker (Germany) said that guidelines could be dangerous if courts and judges expected GPs to have followed them. Antoon Malfliet (Belgium) said that whilst GPs paid lip service to guidelines, they did not use them in practice. It would be better to state that they did not

work. Raffaella Michieli (Italy) reported that the Italian College of General Practitioners was producing a database including guidelines and links to websites. However, there were problems reaching GPs and ensuring implementation. Sometimes, regulations had the effect of guidelines – for example rules restricting the prescribing of statins.

Daniel Mart (Luxembourg) said that guidelines were influenced by culture and money, and that different countries' guidelines did not concur. For example, in the UK National Health Service, guidelines were tailored to the resources available. It was important to filter out the guidelines that were economically or politically influenced. Even then, guidelines were rarely applicable to a particular case, so doctors still had to use their judgement. Medicine was still an art. It was not for politicians to use guidelines to tell doctors how to do their job. Politicians wrongly expected better quality care for less money.

Tineke Slagter-Roukema (Netherlands) said that guidelines required more money and infrastructure for primary health care, and a transfer of resources from secondary care. Merte Bosch (Germany) referred to the issue of patient compliance; politicians must realise that patients did not do what doctors advised. Antoon Malfliet (Belgium) said that any assessment of cost-effectiveness needed to include the costs of absence from work. Guidelines on the use of antibiotics and of antidepressants had failed to do this.

### **3 Future plans (agenda item3)**

Received: Reply to UEMO 2001/042 from Quality Assurance Working Group (UEMO 2001/046)

Proposed report for the development of a certification and accreditation system for health contents registration on the Internet (UEMO 2001/070)

Mateja Bulc (Slovenia) suggested that the proposed report for the development of a certification and accreditation system for health contents registration on the Internet (UEMO 2001/070) fell into the remit of both the Quality Assurance and Continuing Medical Education Working Groups. The Presidency had decided the previous day that the report should be discussed at the next meetings of both Groups.