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Background

Prospective recruitment to research trials in primary care is key in understanding our breathless patient population, yet remains a challenge due to increasing demands on time and resources. A large number of patients present with breathlessness for the first time to their general practitioner (GP) and much of their management is undertaken in primary care. Research to understand more about the breathless patient cohort and their diagnostic process requires identification of patients at their point of presentation.

Aim

To compare two prospective recruitment strategies for adults presenting with breathlessness for the first time in primary care.

Methods

Two strategies were applied to prospectively identify and recruit patients presenting with breathlessness to GP practices in Leicestershire, UK.

- Method 1 used weekly searches for new breathlessness Read codes in the electronic patient records (EPR) at 14 GP practices, followed by a mail out of study information to identified patients.
- Method 2 implemented a template on the EPR at 10 GP practices, triggered at the point of consultation by either breathlessness free text or Read codes. Weekly reports of patients identified were sent to the study team.

Semi-structured interviews with patients and GP practice staff were performed including experiences of the electronic template method, breathlessness and healthcare interactions. Interviews were audiorecorded, transcribed, coded and reviewed by the study team using thematic analysis.







How can we improve recruitment of patients with breathlessness awaiting a diagnosis in primary care?

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Diagnostic pathway for patients with chronic breathless

We want to establish a clinical and cost-effective diagnostic pathway for patients with chronic breathlessness Inclusion criteria: Adults over 40 years old presenting with breathlessness for at least 2 months

Exclusion criteria: A pre-existing known cause for the breathlessness

For the patient: Our GP practice is taking part in a research study about breathlessness. Nould you be happy for us to pass on your contact details to the study team? They will contact you with more information.

does not commit you to taking part in the study



No time to use protocol at present

Patient not present



Figure 1. The electronic template triggered on patient electronic healthcare record.

Results

Using the electronic 'pop up' template (Figure 1.) and GP discussion with the patients enhanced recruitment over a six month period; 36/130 (28%) participants were recruited compared to 4/146 (3%) participants by EPR Read code searches and postal information. GPs found the electronic template to be unobtrusive and helpful to have prompts, and patients were positive about receiving information about research from their GP (Figure 2).

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Patient Quotes

Well I was saying when they said about the research, I just think that you can't get enough of it. We can only improve with it, we can't, we're not going to go backwards, we can only go forwards with it

Clinician Quotes

Well, I have to say it's been very unobtrusive hasn't it. Because all that you've been asking us to do is ask the patient



I think pretty good actually. I think I've found, because our role has just been to try and recruit, so it's a fairly straightforward would you be interested or not?"

Figure 2. Patient and Clinician quotes describing how they heard about the study and use of the electronic template.

Conclusion

An electronic template triggered at the point of consultation increased recruitment to prospective research compared with searching for symptom codes and study mail outs. Both healthcare professionals and the patients were positive about the electronic template recruitment strategy.

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Yes basically I was struggling with my breathing and sort of got a chest infection. So I went down to the doctors and they asked me if I'd be interested in taking part in a breathlessness study. So I said yeah fine lovely

I discussed that with my doctor. And at the time I think there was this survey going on, said do you mind going, me referring you to the survey so they can maybe check and see what's happening, and how

> I think on SystmOne as soon as you type breathlessness all of the information comes up which is really great. I think it prompts people to think about the study and to think about, is this patient possibly suitable?