Dear Members:

The Section of Researchers’ Council is beginning 2014 with another full agenda of exciting initiatives that we trust will further the strength, scope, and influence of family medicine research and enhance the role it plays in improving the health of Canadians. Yes, we are aiming high!

One of our foci in the coming year is to expand communications with our members and others interested in the discipline of family medicine research.

We look forward to sharing our Blueprint—the plan that will guide our direction and activities for the coming years—more broadly. We will provide updates about the work we are doing to meet the Blueprint’s requirements, goals, and objectives. In addition, we hope to engage you—our members—more fully in the work of the Section of Researchers. We will be looking for your input and your participation as we work to achieve our mandate: improving the health of Canadians by increasing the research capacity and capability of the family medicine community through leadership, education, and advocacy.

The Council will also work to increase the awareness of members of the Section of Researchers and other stakeholders in family medicine research by sharing, on an ongoing basis, the accomplishments of those members who have, through their research, made significant contributions to the Blueprint’s mandate.

Beginning with this issue of Kaléidoscope, you will find a series of stories and articles about our 2013 research award recipients, many of whom delivered thought-provoking and inspiring
presentations at Research Day and Family Medicine Forum 2013 in Vancouver. You will also find highlights of presentations by our members from the 2013 North American Primary Care Research Group Annual Meeting, which was held in Ottawa in November.

We look forward to your input and your involvement in the many exciting activities that will take place in 2014. Please contact kaleidoscope@cfpc.ca to get involved or for more information.

Dr. Alan Katz
Chair, CFPC Section of Researchers

Research News

New events at FMF, Research Day 2013: Engaging clinicians and researchers

The College of Family Physicians of Canada’s Family Medicine Forum (FMF) and Research Day events have always been a time for presenting our research, sharing ideas, meeting new colleagues, and celebrating the achievements of our members. This year’s research presentations carried on these traditions while branching out into new and exciting activities designed to engage primary health care clinicians and family physicians not currently involved in research.

Under the leadership of Dr Wendy Norman of the University of British Columbia, the newly developed Family Medicine Forum Research Committee (FMFRC) introduced a more rigorous academic peer review process. This process ensured a more reliable and valid review of submitted abstracts, resulting in the delivery of research findings of unprecedented quality. Research abstracts achieving a combined weighted peer-review score of 3.5/5 or higher will be published in Canadian Family Physician.

Editors from Canadian Family Physician and faculty from the University of British Columbia’s (UBC’s) Master’s in Public Health and Master’s in Health Sciences programs and from the Clinician Scholars program participated in a “Researcher Resources Fair.” They shared their knowledge and provided advice to participants at Research Day.
**Dedicated time for poster viewing** was incorporated into this year’s schedule, allowing time for participants to discuss posters with presenters. This year, four of the best posters received awards.

A number of new presentations showcased high-quality research targeted to family medicine researchers and clinicians alike:

- **The FMF Research Pearls** session featured the top four clinically relevant research papers. Presented initially on Research Day, the session was also presented during FMF as a way of engaging conference participants not currently involved in research.
- **In the Einstein Workshop**, experienced researchers from the United States, New Zealand, Australia, and Canada shared their knowledge of and experience in primary care research in their respective countries. They also shared their vision for moving the discipline forward, with a focus on international collaboration.
- **This year’s NAPCRG Pearls** session, entitled “What Is New? The top 10 research studies that will impact clinical practice for family physicians,” drew more than 600 primary care clinicians and family physicians anxious to learn about new directions for their practice.
- **The Dangerous Ideas Soapbox** attracted 56 abstract submissions. Four top-ranked submissions were presented. Audience members critiqued the ideas, then cast their votes for the most compelling dangerous idea. The winner was Dr Joelle Bradley, for her idea “Could Advance Care Planning Be Like Art?”

Watch for more information on these and other highlights from Research Day and FMF 2013 in future issues of *Kaleidoscope*!
*Nocturnal Leg Cramps and Prescription Use That Precedes Them*

**CFPC Outstanding Family Medicine Research Article 2012**

Family medicine research is patient-oriented research, often arising from practice, which can help family physicians make positive changes that improve the health of their patients. Dr Scott Garrison’s study, “Nocturnal Leg Cramps and Prescription Use That Precedes Them,” which earned him the 2012 award for the CFPC Outstanding Family Medicine Research Article, is an outstanding example of just such a study.

Dr Garrison was in the midst of treating a patient for nocturnal leg cramps, a common condition often presented by older patients, when he learned of funding opportunities from the Vancouver Coastal Health Research Institute for health care clinicians interested in carrying out research. Dr Garrison applied for the funding and went on to pursue a series of projects related to nocturnal leg cramps, the most recent of which explored anecdotal association of muscle cramps with diuretics, long-acting inhaled beta 2-agonists (LABAs), and statins, as described in his award-winning article.

Using prescribing information from linked BC Ministry of Health databases, Dr Garrison and his team examined new quinine prescriptions for the treatment of leg cramps dispensed to adults 50 years and older in the year following diuretic, statin, or LABA initiation. He adapted an innovative but little-used methodology that lent itself to answering his research question, developing a method of calculating confidence intervals, and normalized it for aging. It proved successful, allowing the team to draw a strong link between treatment for nocturnal leg cramps and the use of LABAs and potassium-sparing diuretics and, to a lesser extent, thiazides. In contrast, the association of cramps with loop diuretics and statins was small.

The implications for family practice are straightforward. “The study results suggest that, before taking any action, physicians should look first at a patient’s medications, and consider using interchangeable medications that don’t promote muscle cramping,” says Dr Garrison. “Switching inhaled beta-agonists to inhaled anticholinergics, and switching potassium-sparing diuretics to other blood pressure medications are easy changes that family doctors can make to lessen the burden of nocturnal leg cramps.”

Dr Garrison, who had been in general practice for about 15 years before earning his PhD and becoming involved in research, is now incorporating research into his practice. He says that receiving the award for the CFPC Outstanding Family Medicine Research Article was
“... wonderful recognition for a new researcher. I had previously never been involved in research, nor had I thought it was something I would enjoy doing. Once I became involved, I saw the passion that others had, and I felt a real sense of community among those doing research. I knew that was where I wanted to be.”

Dr Garrison recently joined the Evidence-based Medicine Team in the University of Alberta’s Department of Family Medicine. He is also working to build the Pragmatic Trials Collaborative, a network of family physicians in British Columbia and Alberta intent on conducting important primary care trials that can easily fit into normal family physician workflow.

***

* The Pleasures and Perils of Evaluating Primary Care Transformation

Dr Rick Glazier delivers NAPCRG 2013 Plenary

Dr Rick Glazier, former chair of the Section of Researchers and current President of the North American Primary Care Research Group (NAPCRG), delivered the opening plenary at NAPCRG’s 41st Annual Meeting in Ottawa in November.

Dr Glazier’s lecture, entitled “The Pleasures and Perils of Evaluating Primary Care Transformation,” focused on evaluating the impact of reforms in the Ontario primary care system—one of the world’s largest—in recent years.

Since the early 2000s, Ontario has invested significantly in reforms, including the development of new physician reimbursement methods, the implementation of EMRs, and the emergence of interprofessional team-based work settings.

However, the results have been disappointing. Evidence revealed no improvement in timely access to care, and equity issues also remain. In spite of an increase in the number of people with a primary care provider, Dr Glazier noted that approximately 3 million Ontario residents, including immigrants, those in rural areas, those with lower income, and those with comorbidities, remain outside of a care model and may be lacking appropriate care. Furthermore, there has been only limited improvement in pre-existing performance trends.

The reason for the overall lack of improvement, says Dr Glazier, is what he terms “misaligned incentives”. Reforms have focused on primary care, and there has been little attention paid to reforms in other areas. As a result, for example, the number of emergency department visits
continues to increase, and many Ontario residents continue to experience difficulty in accessing new resources.

Not one to be discouraged, Dr Glazier urged listeners to take pride in the key role played by primary care in the health of patients, to be realistic and patient (scaling up innovation is difficult and change takes time), and to continue working to develop the evidence that will indeed impact policy in the future.

***

Nurturing Curiosity and Making an Impact
Francine Lemire, MD CM, CCFP, FCFP, CAE
Executive Director and Chief Executive Officer

In this month’s issue of *Canadian Family Physician*, Dr Francine Lemire discusses the role of research in family medicine and how the Section of Researchers and the College of Family Physicians of Canada can work together to take family medicine research to the next level. Read her article “Nurturing curiosity and making an impact.”

Research Conferences

**FAMILY MEDICINE FORUM 2014**

**RESEARCH DAY**
Research Day will be held on Wednesday, November 12.

* Call for Research Day Free Standing Paper (oral) and Poster Presentation is now open.
  
  To submit your abstracts [click here](#).
  
  The deadline for submitting your abstracts is April 7th at midnight, Eastern time.

* available in English only.

If you wish to unsubscribe or update your profile/email information, please reply to this email or email kaleidoscope@cfpc.ca.

CFPC [Privacy Policy](#).