

CAN FAMILY DOCTORS PROVIDE LONG-TERM PREVENTION AND THE EVALUATION OF HEALTH INDICATORS IN THE COMMUNITY?

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BACKGROUND: In 1991, in the German town Oestringen, a community – and general practice-based intervention and evaluation system was established by GPs in order to promote healthy lifestyle of the local population. In 2005, six years after finishing the active study period, a further survey should explore the actual cardiovascular health status, especially some indicators.

METHODS: Intervention was made by using the “Three-Level Strategy of Primary Care Physicians”: individual health consultation (1st level), group work in the practice (2nd level) and preventive activities like exercise courses at the community level (3rd level). From 1992 until 1999, six cross-sectional surveys were carried out in the 5 practices of the town. In 2005, a further 10% random sample of the patients of each practice was drawn to estimate prevalence of hypertension, overweight, and smoking by pooling the practice data (about 1.000 patients out of 13.400 inhabitants).

RESULTS: from 1992 to 1999, the prevalence of hypertension (BP \geq 140/90 mmHg) was reduced by 22% (from 55% to 43%, $p < .001$), smoking was reduced by 13%, BMI and Cholesterol remained unchanged. In 2005, only 36.8% were hypertensive, 19% were smokers (nearly unchanged to 18% in 1999), but overweight (BMI $>$ 30), unfortunately, had increased from 18% up to 24%.

CONCLUSION: A long-term evaluation of health indicators can be provided not only in the framework of a scientific study but also in a primary care setting, if local physicians work together and co-operate with the citizens. Probably, a strong continuous intervention is necessary to reduce risk factors over long time.

HDM 023