Introduction

Family physicians are large producers of knowledge. The site of WONCA Europe provides access to almost 20,000 abstracts produced by family physicians since 1995 (from Europe) and 1998 (from World Conferences). On the occasion of 20 years of WONCA Europe, an editorial committee selected 100 of the best abstracts and has asked each author (or a substitute) to make a chapter for the WONCA Book published in 2015 at the WONCA Europe congress.

The content analysis of medical texts also coined as instance organization or text classification is generally achieved by the use of MeSH. MeSH doesn’t always fit the need of the GP/FM. To fill gaps in MeSH, a specific family medicine classification has been developed under the name Core Content Classification of General Practice / Family Medicine (3CGP). A combination of ICPC + Q-Codes (new tool for non-clinical items) provides just fewer than 900 concepts for analyzing the contents of specific texts to family medicine.

Methods & Materials

150 codes were used to classify the texts of which 143 from the classification of non-clinical items Q-Codes and 7 coming from ICPC. Among the topics discussed by the authors and identified by Q-Codes, 35 relate to knowledge management (which include family medicine education), 29 codes concern research and development, 29 doctor's specific area, 24 patients' issues, 11 relate to the structure and 8 deal with ethics, one with ecological hazard.

Results

The 100 chapters of the WONCA Book 2015 were analyzed using 3CGP by a single observer not involved in the editorial committee of the book. Every text has been carefully read and a maximum of two concepts by chapter were reported in an Excel spreadsheet.

ICPC-2 is used to identify clinical items (symptoms – clinical process – diagnosis). Q-Codes are used to identify non-clinical (managerial) items.

Q-Codes are complementary to ICPC-2

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Despite limitations (unique observer – not validated tools) the study reveals striking facts. It is noted that the editorial board has favored themes that affect the creation and the organization of knowledge into the profession.

Clinical items (7 ICPC codes/150) or affecting directly the patients issues (25 Q-Codes/150 ) are poorly represented. (chart 3 & 4)

Discussion

Through this particular lens, it appears that the WONCA editors have chosen more academically than clinically oriented titles.

Chart 1: The 8 Q-Codes main domains

Chart 2: Coding process of 10 chapters of the Wonca book 2015 with ICPC-2 and Q-Codes

Chart 3: 7 clinical and 143 managerial concepts addressed in the 100 chapters of Wonca Book

Chart 4: Distribution of ICPC and Q domains by Wonca book chapters

Chart 5: 8 chapters of the Wonca book 2015 are dealing with ethical issues

Chart 6: Distribution of QT domains by Wonca book chapters

Data, details and bibliography is available at http://docpatient.net/3CGP