



I EUROPEAN FORUM ON
PREVENTION AND PRIMARY CARE

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Themes related to prevention in the Q-Codes taxonomy. Call to a collaborative exploration into the abstracts of Europrev meetings

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- For the documentation of the clinical data, ICPC-2 is used, often in conjunction with the more granular ICD.
- For retrieval of scientific bibliographic information in GP/FM, Medical Subject Headings (MeSH) are used.
- With over 25,000 available MeSH descriptors, indexing is not easy, and yet not all aspects of the broad field of GP/FM are covered

Question :

What are they talking about?

Methods :

Qualitative analysis of abstracts of GPs to congresses

- 1700 abstracts analysed (logiciel Atlas-ti)
Congress Wonca – CNGE – Belgium – Switzerland
- 600 research abstracts analysed by EGPRN
- Identification of the contextual concepts exchanged by GPs

Results

- 182 concepts
- Hierarchical organization
- 8 domains
- Categories / sub / sub-categories

2007-2017

- Online, free access
- Organized visually into a knowledge base
- Extraction in Excel and OWL-2
- Related to MeSH

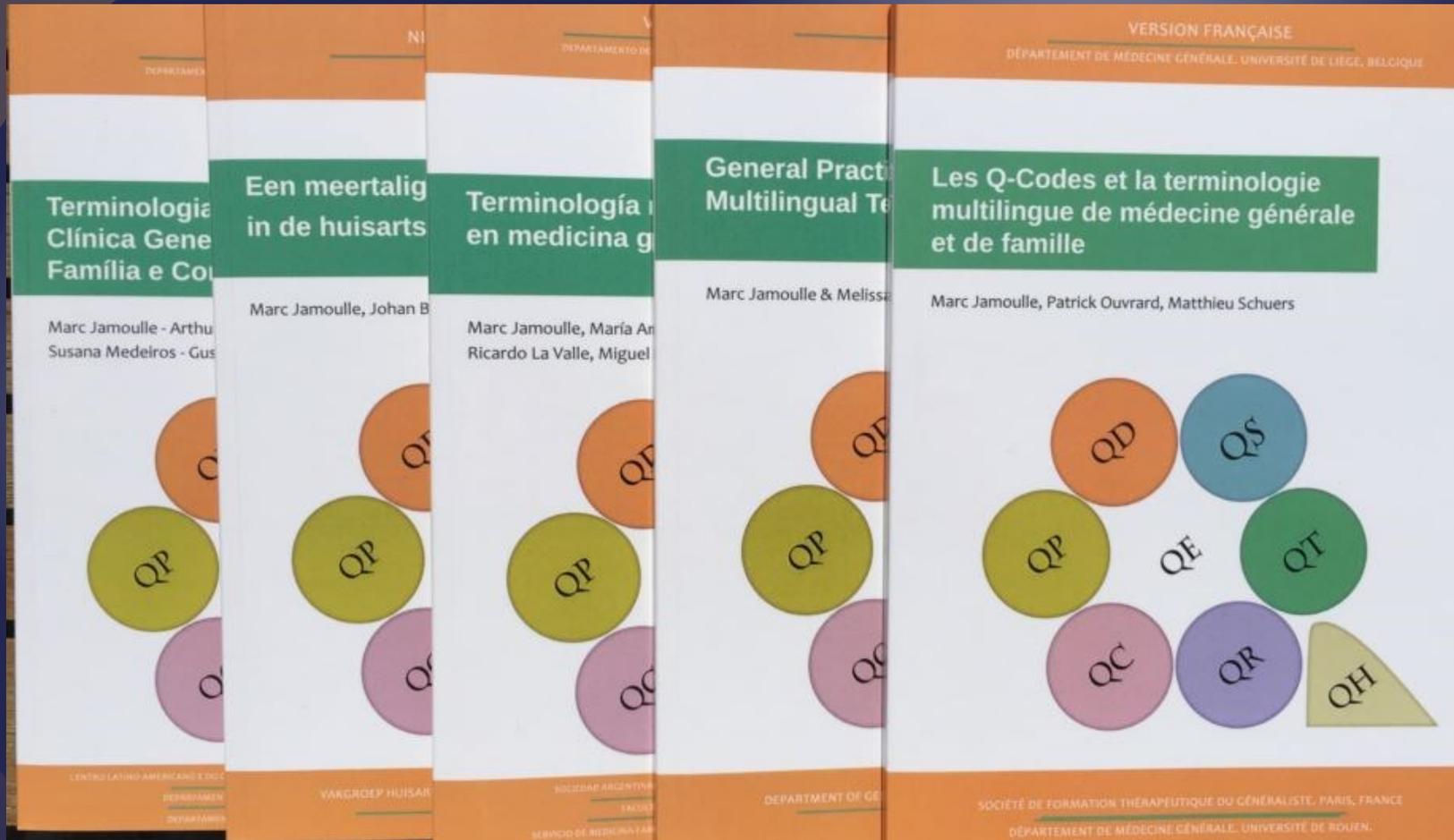
Title, definitions (8 languages), conceptual universes, MeSH links, bibliographic links, links babelnet.org, links dbpedia

<http://www.hetop.eu/Q>

Results

5 books; available on www.publier-un-livre.com/fr/recherche?q=jamouille

terminologies in 8 languages : available on www.hetop.eu/Q

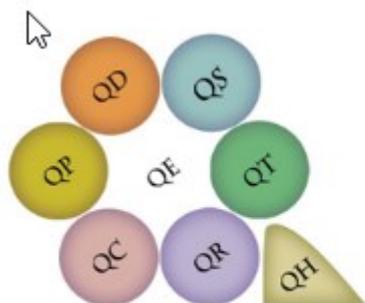


French, English, Spanish, Portuguese, Dutch, Turkish, Korean, Vietnamese

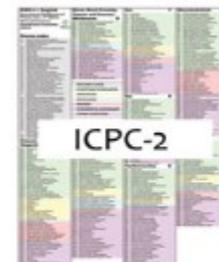
Announced; Kinyarwanda, Polish, Georgian

Resultts

Companion internet site
<http://3cgp.docpatient.net>



CORE CONTENT CLASSIFICATION IN GENERAL PRACTICE / FAMILY MEDICINE



WELCOME !

ABOUT THE 3CGP PROJECT

THE Q-CODES

ICPC-2

THE HETOP WEB SERVER

IMPLEMENTATION OF Q-CODES

CONTACT

On HeToP
ICPC 19 languages
Q-Codes 8 languages

Join Q-Codes and ICPC to form 3CGP

3CGP allows indexing by 1500 descriptors of general practice and family medicine

Résultats:

LES Q-CODES COMME SOURCE
DE BIBLIOGRAPHIE – 2016

CODER LES TFE AVEC 3CGP –
BELGIQUE 2017

CODIFICAÇÃO DO CONGRESSO
SBMFC BRASIL 2017

BIBLIOGRAPHY P4 /
BIBLIOTECA VIRTUAL P4
/BIBLIOGRAPHIE P4 –
URUGUAY 2017

Voir la rubrique
implémentation sur
<http://3cgp.docpatient.net>

CLASSIFICATION AUTOMATISÉE
DE RÉSUMÉS MÉDICAUX –
BELGIQUE 2015

Q-CODES IN WEB PROTÉGÉ

CODAGE AUTOMATISÉ AVEC
ECTMV3 – FRANCE 2017

Q-CODES IN AN E-LEARNING
PROGRAM IN VIETNAM 2016

Humans: Indexation

Machines : automated tags

Knowledge management
Specific to GP/FM

Example of a classified abstract

Title : [Quaternary prevention subjects in general medicine]

Author : *Pierre-Axel Warnier*

Language : fr

Year : 2016

Abstract:

The concept of quaternary prevention is at the same time little known and little implemented by the Belgian doctors. How to increase the penetrance of this concept within their work? A dissemination method is implemented. To make Quaternary prevention more accessible to general practitioners, we propose the creation of a platform on a well-known website. We will explain the concept of quaternary prevention and post practical fact sheets answering common clinical questions from the general practitioner.

Classification: **QD44 quaternary prevention QS41 family doctor QT23 continuing medical education QT42 online knowledge exchange**

Master thesis in GP/FM UCL University, Belgium

Full text in French ; http://docpatient.net/tfe/PAW_txt.pdf

Discussion

- First attempt to establish a table of GP/FM material
- Reflects a western approach
- Supported by a an international group
- Necessarily unfinished
- Requires update
- Not officially endorsed
- Must prove itself in indexing and automated knowledge management

Proposal to
Europrev

To make a call to Europrev members to come on board of the Q-Codes working group and to help to make more accurate the preventive fields in the Q-Codes taxonomy

Current
Taxonomy
To be
considered
as a draft
for the
field

- [-] QD doctor's issue
 - [+] QD1 communicator
 - [+] QD2 doctor as carer
 - [+] QD3 care manager
 - [-] **QD4 clinical prevention**
 - QD41 primary prevention
 - QD42 secondary prevention
 - QD43 tertiary prevention
 - [-] QD44 quaternary prevention
 - QD441 overmedicalisation
 - QD442 disease mongering
 - QD443 overinformation
 - QD444 overscreening
 - QD445 overdiagnosis
 - QD446 overtreatment
- [+] QD5 complementary medicine
- QD6 medico legal issue
- QD7 professional image
- QD8 work–life balance

11 entries

Difficult field
Some examples

Q-Codes are complementary to ICPC

Q Q-codes

QC patient's category

QD doctor's issue

QE medical ethics

QH planetary health

QP patient issue

QR research

QS structure of practice

QT knowledge management

Q Q-codes

QD doctor's issue

QD1 communicator

QD2 doctor as carer

QD3 care manager

QD4 clinical prevention

QD5 complementary medicine

QD6 medico legal issue

QD7 professional image

QD8 work-life balance

Q Q-codes

QD doctor's issue

QD4 clinical prevention

QD41 primary prevention

QD42 secondary prevention

QD43 tertiary prevention

QD44 quaternary prevention

Q Q-codes
QD doctor's issue

QD4 clinical prevention

QD44 quaternary prevention

QD441 overmedicalisation

QD442 disease mongering

QD443 overinformation

QD444 overscreening

QD445 overdiagnosis

QD446 overtreatment

Direct relations

Quaternary prevention attitude is dealing with many concepts inherent to GP/FM

QD doctor's issue

- QD3 care manager
- QD31 health risk management
- QD32 health issue management
 - QD321 medically unexplained symptom
 - QD322 multimorbidity
 - QD323 shared decision making
 - QD324 incidentaloma
 - QD325 prescribing behaviour
 - QD326 deadoption
- QD33 health status assessment
- QD34 genetic issue
- QD7 professional image
- QD8 work-life balance

QE medical ethics

- QE1 personal view
- QE2 professional ethics
- QE42 informed consent

QP patient issue

- QP1 patient safety
- QP2 patient-centredness
- QP23 cultural competency
- QP24 affordability
- QP25 acceptability
- QP4 patient perspective
- QP41 patient satisfaction
- QP42 patient knowledge
- QP43 patient autonomy
- QP44 patient culture
- QP7 patient advocacy

QR research

- QR1 science philosophy
- QR3 research method
- QR31 qualitative study

QT knowledge management

- QT2 training
 - QT21 undergraduate
 - QT22 vocational training
 - QT23 continuous medical education
 - QT24 Balint group
 - QT25 trainer
- QT3 quality assurance
 - QT31 evidence based medicine
- QT5 health data reporting
 - QT51 sentinel network
 - QT52 adverse event

MeSH Medical Overuse Year introduced: 2016

Excessive or unnecessary utilization of health services by patients or physicians.

Medical Overuses

Overuse, Medical

Overuses, Medical

Overuse, Health Services

Overutilization of Health Services

Health Services Overutilization

Overutilization, Health Services

Health Services Overuse

Health Services Overuses

Overuses, Health Services

Overdiagnosis

Overdiagnoses

Overmedication

Overmedications

Medical Preference Misdiagnosis

Medical Preference Misdiagnoses

Misdiagnoses, Medical Preference

Misdiagnosis, Medical Preference

Preference Misdiagnoses, Medical

Preference Misdiagnosis, Medical

Unwanted Medical Care

Medical Care, Unwanted

Medical Cares, Unwanted

Unwanted Medical Cares

Preference Misdiagnosis

Misdiagnoses, Preference

Misdiagnosis, Preference

Preference Misdiagnoses

Overtreatment

Overtreatments

Let's try

Medical oversuses MeSH in Pubmed

Medical overuses in www.HeTOP/Q

Disease mongering in HeTOP

Overscreening in HeTOP

Quaternary prevention in HeTOP

Existing MeSH

Non existing MeSH

The **prevention** of recurrences or exacerbations of a disease or complications of its therapy.

Entry term

Prevention, Secondary
Preventions, Secondary
Secondary Preventions
Relapse Prevention
Prevention, Relapse
Preventions, Relapse
Relapse Preventions
Early Therapy
Early Therapies
Therapies, Early
Therapy, Early

-> The 2d prevention definition corresponds to the 3d prevention in GP/FM !

[Secondary prevention in PubMed](#)

[Secondary prevention in HeTOP](#)

Could Europrev members consider this path, opened by EGPRN?

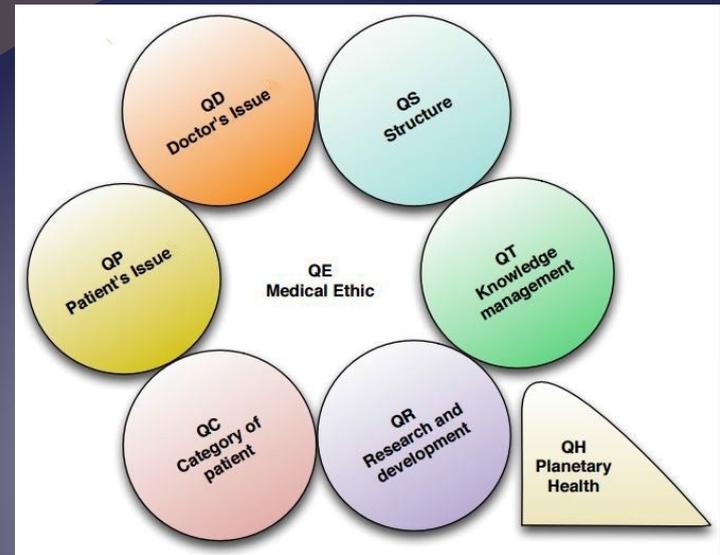
Kruschinski, Carsten, Maaïke Lange, Christos Lionis, Chris van Weel, and Eva Hummers-Pradier. 2010.

“Themes and Methods of Research Presented at European General Practice Research Network Conferences.”

Family Practice 27 (4): 459–67. doi:10.1093/fampra/cmq023.

The Q-Code’s rubrics about prevention are awaiting a critical appraisal

Thank you !



- Your participation encouraged
- Join the Q-Codes working group
- Wonca International Classification Committee working group
- Contact : marc.jamouille@gmail.com <http://www.ph3c.org/Q>