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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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Background

For the documentation of the clinical data, the International Classification of Primary Care (ICPC-2) is used, often in conjunction with the more granular International Classification of Diseases (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 GM/FM are covered¹.

ICPC-2² has been developed to identify reasons for encounter, symptoms, acts performed or requested and diagnosis in daily practice: It captures clinical encounters for epidemiological research. But, it was not constructed to reflect the non-clinical aspects of the profession, such as organizational, managerial, educational, and investigational aspects.

Recently, a new taxonomy of organizational aspect of GM/FM has been developed to ameliorate this situation. The purpose of this development was to provide tools to exploit modern technology in terminology for information storage and retrieval systems^{3 4 5}, such as machine learning, semantic web techniques⁶ and natural language processing (NLP).

The 182 concepts identified were thoroughly described in terminology records, which are freely accessible on the web (www.hetop.eu/Q). All concept and definitions were translated into 8 languages and are available online. (<http://3cgp.woncaeurope.org>). A book is available in 6 languages⁷

To develop the Q-codes 1700 abstracts of GP/FM congresses have been carefully analyzed. This has been the basis of the work. As a team of the EGRPN has also analyzed 600 EGPRN abstracts and developed a taxonomy of research, I have this work has been incorporated to update the QR domain. Thus ongoing Q-Codes are based on the analysis of 2300 abstracts

The most important fact is that there is a Q-Codes only if the theme has been discussed by physicians during congresses. This is a bottom-up approach which contrast with the expert approach of the authors of textbook

The Q-Codes have been integrated with the clinical classification ICPC-2 into a coherent whole, under the name Core Content of General Practice and Family Medicine (3CGP), for further enhancement of medical documentation and indexing of GP/FM master thesis and congress abstracts

The value of a taxonomy is determined by the quality and speed of the maintenance and updating process. This will be handled by a working group of the Wonca International Classification Committee (WICC) (www.ph3c.org/Q) already authors of ICPC-2.

Aim

to present the preventive aspects of the Q-codes, a taxonomy specifically directed to describe the managerial aspects of GP/FM. 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

Methods

To present briefly the taxonomy we will provide a one-page overview of the 182 descriptors in English, Spanish and Portuguese to the participants. (<http://3cgp.docpatient.net/tabular/>)

The preventive themes included in Q-Codes will be discussed and example will be given on how qualitative approach has been used to retrieve themes in abstracts

A call will be made to participant to constitute a team to analyze the available Europrev abstract and compare to the content of Q-Codes version 2.5

Results

- Examples of the analyze of an abstract:

Quaternary prevention subjects in general medicine⁸

The concept of quaternary prevention is at the same time little known and little implemented by the Belgian doctors. How to increase the penetration 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

- Ongoing projects using Q-Codes
 - Indexation of master thesis in French speaking Belgium
 - Automatic coding with ICPC and Q-Codes ; the ECTMV project, Rouen university, France
 - Indexation of the next congress of the Brazilian society of Family and community medicine
 - Use of Q-code in e-learning program in Vietnam
- Description of preventive themes in the taxonomy

QD4 clinical prevention (Q-code)

Full tree

- ▣ Q Q-codes
 - ▣ QD doctor's issue
 - ▣ 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

- Call for a collaborative work: identification of the main theme addressed by Europrev congress participants with similar approach, referring to the EGPRN approach⁹

Discussion

With the participants

References

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⁹ Kruschinski C, Lange M, Lionis C, van Weel C, Hummers-Pradier E. Themes and methods of research presented at European General Practice Research Network conferences. *Family practice* [Internet]. 2010 Aug [cited 2016 Jan 28];27(4):459–67. Available from: <http://www.ncbi.nlm.nih.gov/pubmed/20427325>