

CAN ACADEMIC DETAILING CHANGE PHYSICIAN ATTITUDES IN THE CARE OF OLDER PATIENTS?

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BACKGROUND: We previously reported improved knowledge retention among physicians when academic detailing was combined with printed materials compared to printed materials only. This study looks at the effect on changing attitudes towards geriatric care.

METHODS: Physicians were randomized into intervention (group 1, n=16) that received academic detailing plus printed materials, and control (group 2, n=15) that received printed materials only. The intervention involved 15 minutes of academic detailing from a geriatrician on 5 geriatric topics. Primary outcome was aggregate attitude change towards geriatric care, measured by summing the scores of 8 statements from the Geriatrics Attitude Test (possible range 8 to 40). Higher score indicates better attitudes and increased score over time represents attitude improvement.

RESULTS: At baseline, most subjects expressed neutral or better opinion towards providing care for elderly patients (78.1% in group 1 versus 83.7% in group 2, p=0.32). The aggregate attitude scores were similar between groups at baseline (mean±SE: 30.7±1.7 versus 31.2±1.4), and improved slightly at final follow up (31.1±1.4 versus 32.0±1.4). At final follow up, the improvement in attitude score from baseline was slightly larger in group 1 (0.56±0.93 versus 0.20±1.1; 95% CI for difference: -3.4, 2.6). Subjects who improved more in knowledge retention were less likely to show an improvement in aggregate attitude (odds ratio 0.21 per point of improvement in knowledge retention, 95% CI: 0.05, 0.92).

CONCLUSIONS: Physician attitudes towards geriatric care improved slightly in both groups, and the between-group difference was small and not significant. Subjects with greater knowledge improvement post academic detailing were less likely to demonstrate attitude improvement.

Key words: academic detailing, attitude, geriatrics