



In the Literature

DIAGNOSTIC SCOPE OF AND EXPOSURE TO PRIMARY CARE PHYSICIANS IN AUSTRALIA, NEW ZEALAND, AND THE U.S.

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Patients in the United States get far less face time with primary care physicians than do patients in Australia and New Zealand, say the authors of a Commonwealth Fund-supported study published in the June 16 issue of *BMJ*.

Using survey data from the three nations, researchers found that the average American spends a total of about 30 minutes per year with a primary care physician—about half the time of New Zealand patients and one-third of Australian patients. “This difference may have real consequences in terms of preventive care and management of chronic conditions,” say the authors of “[Diagnostic Scope of and Exposure to Primary Care Physicians in Australia, New Zealand, and the United States: Cross Sectional Analysis of Results from Three National Surveys](#).”

U.S. Primary Care Less Comprehensive Than Australia, New Zealand

Led by Andrew B. Bindman, M.D., of the University of California, San Francisco, the research team compared data on patient mix, scope of practice, and duration of primary care visits from three comparable cross-sectional surveys performed in 2001–2002: the Bettering the Evaluation and Care of Health survey in Australia; the National Primary Medical Care Survey in New Zealand; and the National Ambulatory Medical Care Survey in the U.S.

The biggest difference they found across the nations is the substantially shorter time that U.S. patients spend face-to-face with primary care physicians. Although a primary

care visit in the U.S. runs about 10 percent longer than such visits in Australia and New Zealand, patients in the latter two countries see primary care physicians more often. Total annual exposure to primary care doctors was 29.7 minutes in the U.S., 55.5 minutes in New Zealand, and 83.4 minutes in Australia.

The U.S. average is inadequate for meeting the health care needs of the population, the authors note. The U.S. Prevention Services Task Force recommends an estimated average of 37 minutes a year for children and 40 minutes for adults. “Not only does the time demand for such services exceed the annual time available to the average American in primary care, it does not consider the average additional need of 20 to 40 minutes a year for each chronic condition a person may have,” the authors say.

The team also found higher rates of primary visits for endocrine and cardiovascular problems in the U.S. In the U.S., nearly 18 visits out of 1,000 were for obesity, compared with 11.3 in Australia and 9.1 in New Zealand. The U.S. also had substantially higher rates of visits because of diabetes and high cholesterol.

Similarities and Differences in Primary Care Practice

Although the supply and financing of primary care differ across the countries, the number and types of problems managed per visit, along with visit durations, are similar. For example, primary care physicians in each country deal with an average

of 1.4 problems per visit, the researchers found. And except for endocrine and cardiovascular problems among U.S. patients, the frequency of health problems managed in primary care was similar across the three countries.

Primary care physicians in the U.S., however, managed a narrower range of problems than did their counterparts in New Zealand and Australia. In the U.S., 45 conditions accounted for 75 percent of problems managed, compared with 52 in Australia and 57 in New Zealand. This finding, say the authors, may be a result of the higher proportion of specialists in the U.S. combined with American patients' ability to self-refer for specialty services.

Conclusions

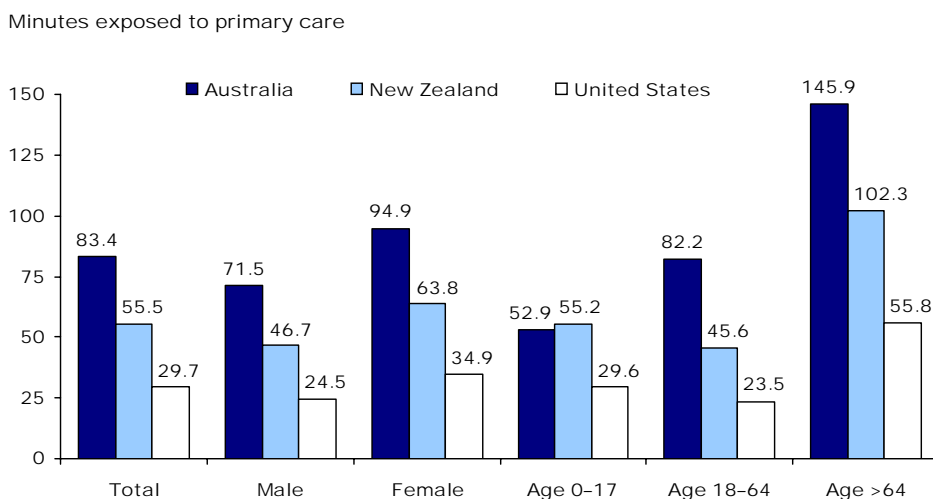
Previous research shows that a strong primary care system can improve health outcomes and reduce health care costs. Of the three countries examined, only Australia nears the per capita exposure to primary care that could reasonably meet patients' demands for preventive, acute, and chronic care needs, the authors say. "The severe shortfall of

available time in primary care for prevention and chronic care management in the U.S. could partially explain why the U.S. does not have health outcomes that correspond to its overall investment in health care," they conclude.

Facts and Figures

- Australia has the highest number of primary care physicians per 100,000 population (112), followed by the U.S. (87) and New Zealand (78).
- Patients age 65 and older comprised similar proportions of total visits in each nation (22%–23%), while a higher proportion of visits involved children in the U.S. (30%), versus Australia (17%) and New Zealand (27%).
- Females comprised more than half of primary care visits in each country, and new patients accounted for less than 10% of the visits in each country.

Mean Annual Exposure to Primary Care per Year by Country and Demographics, 2001–2002



Source: A. B. Bindman, C. B. Forrest, H. Britt et al., "Diagnostic Scope of and Exposure to Primary Care Physicians in Australia, New Zealand, and the United States: Cross Sectional Analysis of Results from Three National Surveys," *BMJ*, June 16, 2007 334(7606):1261–66.