

# GP frequent consulters: their prevalence, natural history, and contribution to rising workload

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## SUMMARY

*A small proportion of patients use a disproportionate amount of general practitioners' (GPs') time. We demonstrate here that such frequent attending behaviour tends to persist through five-year follow-up, suggesting the need for the development of specific management strategies. We also show that, at any rate in one practice, total workload is increasing dramatically, and that frequent consulters make up a large part of the increase.*

*Keywords: frequent consulters; general practice, primary care; outcomes; follow-up.*

## Introduction

FREQUENT consulters (FCs) use the most GP resources, have many and chronic complaints, and often have a difficult relationship with staff. Although many studies have highlighted the problem,<sup>1-5</sup> the natural history of frequent consulting remains largely undefined.<sup>6</sup> We therefore purposed to determine the prevalence and outcome of FC behaviour in relation to total practice workload.

## Method

Frequent consulters were selected using routinely collected 1990–1995 practice computer system (VAMP) data at Hollow Way Surgery, Oxford: a three-partner practice in a stable, mixed residential/industrial area. The 6000 patients registered at the surgery were predominantly from social classes III–V, and most had been registered for many years.

We defined an FC as having more than 12 surgery consultations, or six daytime, or four night home visits in one calendar year, excluding clinic consultations. From printouts (VAMP REPORTER) for each of the years 1990–1995, FCs were determined either as 'new', or as frequent consulters in a previous year. Thus, we defined a cohort of new FCs for each year and followed them up until the end of 1995. There were four possible outcomes: death, leaving the practice, continuing to be an FC, or ceasing to be an FC.

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## Results

In 1990, there were 37 FCs (0.6%), and in 1995 this had risen to 168 (2.7%), a more than four-fold increase (Table 1). The number of new FCs increased from 37 in 1990 to 86 in 1995.

In 1990, 37 FCs were responsible for 5.7% of total consultations, whereas, in 1995, 168 FCs accounted for 13.8% of total consultations. The percentage increases for visits, especially night visits, are even larger (data not shown).

Frequent consulters' consulting behaviour during the study period remained stable at a mean of about 14 surgery consultations per year, 2.4 daytime visits, and 0.5 out-of-hours/night visits per year; a total of approximately 17 consultations/visits.

There was also a large and progressive increase in total practice workload, even though the practice list remained at 6300. Total consultations increased from 11 553 in 1990 to 20 158 in 1995. The proportion of registered patients consulting at least once during the year increased from 51% to 72%, and mean consultations per consulting patient also rose from 3.20 to 3.96.

## Frequent consulters' demographic characteristics

Ninety-five out of 372 (33%) FCs were male, with a mean age of 50.7 years (range from neonatal to 93 years, SD = 23.2) and a large excess of older subjects. Most had been registered for many years: only one had left, and one had died.

## Outcome of frequent consulting

About 1 in 3 'new' FCs are still FCs in the following year. However, as each year's cohort of new FCs is followed through time, further patients consult frequently again in subsequent years. Hence, the proportion of patients who have consulted frequently in one or more subsequent years increases with length of follow-up. Twenty-eight out of 37 (76%) of the 1990 cohort of FCs consulted frequently in at least one calendar year between 1991 and 1995.

## Factors associated with continued frequent consulting

These were explored with logistic regression analysis (using Stata software), including all the information from the VAMP REPORTER output, i.e. age, sex, and number of consultations. Persistence was associated both with older age and with a high number of consultations in the index year, but the sex of the patient had no effect.

## Discussion

Although frequent consulting behaviour was transient in some patients, we found that it persisted in many, especially in older patients with higher numbers of consultations in the index year. These patients may have substantial unmet clinical needs, as well as posing a burden on the practice. We are currently trying to elucidate these patients' problems, with a view to developing a management strategy.

The increased number of FCs probably reflects the observed general increase consultation in the study practice; that is, a shift of the whole distribution to the right. Without the means to influ-

**Table 1.** Frequent consulters' contribution to total workload at Hollow Way Surgery, Oxford. An FC is defined as having more than 12 surgery consultations, or more than six day visits, or more than four night visits, per calendar year.

	1990	1991	1992	1993	1994	1995
Number of patients registered	6330	6323	6333	6310	6311	6318
Number of FCs	37	71	95	89	140	168
Total consultations by FCs	655	1240	1552	1450	2308	2784
Consultations per FC	17.7	17.5	16.3	16.3	16.5	16.6
Total practice consultations	11 553	14 296	15 005	16 407	18 282	20 158
Percentage total consultations by FCs	5.7	8.7	10.3	8.8	12.6	13.8

ence mass consultation behaviour, this group of high utilizers may be an appropriate group for GPs to focus on, should they wish to try to exert some control over their total workload.

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