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## Academic detailing in general practice – a study protocol

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**Background & Aim:** The current evidence suggests that dissemination of new knowledge to clinicians through scientific articles has a small effect. More interactive techniques such as Academic Detailing has been shown to be effective in changing behavior. Academic Detailing is a method of Continuing Medical Education, where a health care professional disseminates new knowledge within a specific field to a peer in an outreach visit. The effect of Academic Detailing in general practice has not been systematically studied in Denmark but has proven to be effective in other countries. Our aim is to investigate the effect of Academic Detailing in the Capital Region of Denmark.

Method: We plan to randomize all general practitioners in the Capital Region of Denmark to receive two short visits of 15 minutes duration by a pharmacist trained in Academic Detailing or no visits. The key messages will be: (1)avoid diclofenac and selective COX-2 inhibitors, alternatively prescribe ibuprofen or naproxen for the shortest time possible. In addition, the pharmacist will provide information on (2)risk patients and interactions and on (3)alternative drugs such as paracetamol. Three months after the primary visit, a new brief visit will be planned for a recapitulation of the key messages. The prescribing of NSAIDs among general practitioners receiving visits will be compared to the prescribing of NSAIDs among general practitioners not receiving visits. Furthermore, we plan to compare the prescribing of NSAIDS before and after the intervention. Prescribing patterns will serve as a proxy for the effect of an Academic Detailing intervention. Information on the number of dispensed prescriptions for NSAIDs will be gathered from the National Prescription Registry, where both patients and practitioners will be anonymized for the researchers. Perspectives Academic Detailing could potentially be a cost effective support to the General Practitioners in the Capital Region of Denmark.