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Healthcare seeking behaviors among the hypertensive patients in a health care center in Stockholm

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Aim: The aim of current study was to investigate the healthcare seeking behaviors of patients with hypertension in a health care center of Stockholm and their satisfaction with the care received.

Methods: As in the baseline study of a prospective study on self-care and health care seeking behaviors of patients with hypertension, 300 subjects living in an area of Stockholm were enrolled. In present report the healthcare seeking behaviors of this population and their satisfaction with the health care they have received is analyzed and presented as baseline statistics for 2006 survey.

Results: Men comprised about 43% of the participants and 57% were women. Mean age was 60.8(SD: 11.3) years. Sixty-eight percent of subjects were born in Sweden, 11.3% in Nordic counties and the rest were born in other countries. In response to the question that did you have a doctor in recent year to turn to? 108(42.2%) answered yes. 79.3% said they searched for doctors in 2005. They were visited by the doctor 3.2 times in average. 34.6% said they visited the doctor for controlling their blood pressure. 30.8 %persons visited other medics such as nurses for their blood pressure control. About 62.3% were visited during the recent year exclusively by the district family doctor and about 9.3% of others were visited additionally by at least one other type of health care providers making a sum of 71.6% of the participant that have been visited at least once by the district family physician. Asking for their satisfaction with the health care they receive overall, about 83% stated that they were satisfied. Eighty percent of the subjects also stated they were satisfied with the health provided by their local health center (vårdcentral).

Conclusion: The healthcare services for people with hypertension in this study population in Stockholm was overall satisfactory with respect to service utilization and patient satisfaction, however, there is a capacity for further improvement.