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Deciding if lifestyle is a problem: GP risk assessments or patient evaluations? A conversation analytic study of preventive consultations in general practice

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Aim: The aim of our study is to analyze the interaction between patients and GPs in preventive consultations with an emphasis on how patients answer GPs' questions about lifestyle, and the conditions these answers impose on the process of establishing agreement about lifestyle as a problem or not.

Method: Six general practitioners (GPs) video-recorded 15 annual preventive consultations. From these, 32 excerpts of discussions about lifestyle were analysed using Conversation Analysis (CA).

Results: GPs used an interview format to assess risk in patients' lifestyles. In some cases patients adhered to this format and answered the GPs' questions, but in many cases patients gave what we have termed "anticipatory answers". These answers indicate that the patients anticipate a response from their GPs that would highlight problems with their lifestyle. Typically, in an anticipatory answer, patients bypass the interview format to give their own evaluation of their lifestyle and GPs accept this evaluation. In cases of "no-problem" answers from patients, GPs usually encouraged patients by adding support for current habits.

Conclusions: Patients anticipated that GPs might assess their lifestyles as problematic and they incorporated this possibility into their responses. They thereby controlled the definition of their lifestyle as a problem or not. GPs generally did not use the information provided in these answers as a resource for further discussion, but rather relied on standard interview procedures. Staying within the patients' frame of reference and using the patients' anticipatory answers might provide GPs with a better point of departure for discussion about lifestyle.