

OP04.4

Identifying attitudes toward patients with medically unexplained symptoms in Slovenian family medicine physicians

Vojislav Ivetic(1,2), K Pasic(2), P Selic(3)

(1) Department of Family Medicine, University of Maribor, Maribor, Slovenia

(2) SAVA MED, d.o.o., Spodnji Duplek, Slovenia

(3) Department of Family Medicine, University of Ljubljana, Ljubljana, Slovenia

Corresponding author: Dr Vojislav Ivetic, Sava Med D.O.O., Family Practice, Spodnji Duplek, Slovenia. E-mail: iveticv@gmail.com

Background & Aim: Medically unexplained symptoms (MUS) are a poorly defined clinical entity. This study aimed to identify attitudes toward patients with MUS in Slovenian family medicine physicians (FMPs).

Method: Qualitative and quantitative research methods were employed. Firstly, five focus groups were carried out in the period from July to September 2011. The findings were used in the quantitative part of the study applying random sampling (n = 90). FMPs were invited from all over the country to participate in the study from January to March 2012. Analysis of qualitative material was performed using ATLAS.ti 7 software, and quantitative data were statistically processed using SPSS 21.0.

Results: in the process of coding, we created 64 codes, categorising them into eight categories (communication, physician-patient relationship, causes for MUS, MUS patient characteristics, physician characteristics, actions taken so far, positive attitude towards patients, treatment and management proposals). in the quantitative part, we received a response from 63 (70%) of the invited FMPs, who stressed the importance of MUS prevention and treatment of MUS patients in 84.1% (n = 53) and the importance of good communication with the patient in 77.8% (n = 49), while 93.7% (n = 59) of them were of an opinion that patients with MUS leave them feeling exhausted. As potential reasons for MUS, FMPs described problems in patients' interaction with their surroundings (100%, n = 63), past and current stressful events (96.8%, n=61) and hidden psychiatric diseases (68.3%, n = 43). Quality of MUS patient care would improve with more education in the fields of basic psychotherapeutic techniques, difficult patient approach (95.2%, n = 60) and communication skills (95.2%, n = 60).

Conclusions: We found that Slovenian FMPs put a strong emphasis on prevention and treatment of patients with MUS and that these patients generally leave them feeling tired and frustrated.