

ecOS Physical Activity Promotion in General Practices in Switzerland



Section of both Basel

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Background

- Physical inactivity is increasing in the Swiss population.
- Success in increasing physical activity in patients after systematic screening of patients in a Swiss pilot project in 5 general practises in Zurich.

Aim

- Develop and test a model for a systematic screening and counselling of patients in primary health care institutions suitable for a large number of general practitioners.
- A minimum of 25 general practitioners from the North-western region of Switzerland was planned to be recruited.

Method

- Recruitment: Primary care physicians were invited to participate in the project through mailing, journal articles, presentations at meetings and personal contacting by physicians of the project team.
- Systematic screening (questionnaires) on physical activity level of patients aged 16-65 years (Fig.1).
- Distribution of questionnaires occurred during several two-week periods from January 2004 to July 2005.
- People identified as insufficiently physically active were offered a brochure or a voucher for individual counselling with a trained physical activity adviser.

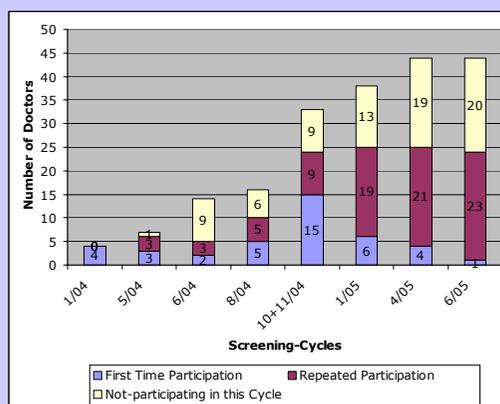
Results

Tab. 1: Recruitment success by strategy

Recruitment Strategy	Targeted Population	Doctors Participating	Success-Rate
Reporting in Journals and presentation at conference	approx. 500	5	<1%
Personal Mailing and Follow-up by project management (phone)	64	12	19%
Presentation at meetings and personal contact and follow-up by peers	81	25	31%
Members of the Project group	-	2	-
Sum	>600	44	

Results (cont.)

Fig. 2: Participation of doctors by screening cycles



Tab. 2: Patient screening and activity level

	n	%
Total number of screening weeks	246	
Number of eligible patients	7455	100%
Number of filled-in questionnaires	4987	67%
Physical activity level discussed with patient	4621	93%
Insufficiently physically active	1049	23%
Brochure or voucher accepted among physically inactive	621	59%
Voucher for activity counselling encashed (among 157 accepted vouchers)	49	31%

Percentages refer to the preceding row
 Reasons for eligibility: Age 16-65 years, questionnaire not yet filled-in, patient with consultation, German speaking patient
 Reasons for not-filling in the questionnaire: Patient's refusal/ no time (14.1%), practice did not have time (14.5%), forgot to give questionnaire (4.4%)

Conclusions

- Doctors are best recruited when contacted by peers.
- Recruitment takes time. Once recruited, doctors repeatedly participate.
- Reducing effort and workload of practices and professional organization is key to successful implementation of the proposed intervention model.
- Physically insufficiently active people were open for receiving information concerning their activity behavior.
- 38% of insufficiently active people being offered a voucher accepted it and thereof 31% went to an activity counseling.

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Fig. 1: Systematic screening of patients' physical activity in general practices

