

Illness perceptions in primary care patients

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ABSTRACT

The study was carried out in Aarhus County, and 38 general practitioners and 1785 patients consulting their GP with a new health problem participated.

The aim of this dissertation was to examine whether patients' illness perceptions of a current health problem in primary care were associated with self-rated physical and psychological health, with patients' satisfaction with the consultation, and with patients' use of health care services. For that purpose, we developed a new, Danish version of the "Illness Perception Questionnaire" (IPQ).

Negative illness perceptions, such as the health problem would be long-lasting and have severe consequences as well as statement of lifestyle and psychosocial reasons, were associated with larger consumption of health care services in the primary sector, both two years prior to consultation and during a 2-year-follow-up. Perceiving negative illness perceptions was associated with lowered self-rated physical and mental health in the follow-up period and with patient dissatisfaction with the consultation. Patients consulting GPs, who had received a two-day communication course in better treatment and diagnostics of patients with functional somatic symptoms (The TERM-Model), were more satisfied – especially patients who were beforehand insecure about what was the matter.

GPs were better at identifying the patients' understanding when both patients and GPs had a physical understanding of the health problem. Both patients and GPs were less satisfied with the consultation, when the GPs gave the diagnosis "medically unexplained". Only patients with GPs who had diagnosed the health problem as well-defined physical, but who themselves had a psychological understanding, reported a reduction in mental health at follow-up. Regarding physical health both patients with the MUS-diagnosis and patients with a psychological understanding experienced a reduction in physical health at follow-up. Both the GPs' MUS-diagnosis and the patients' psychological understanding predicted lower self-rated physical health and larger consumption of health care services two years ahead.

Further elaboration combining qualitative methods with completion of the IPQ in primary care may improve the questionnaire. Moreover, studies following the illness perceptions prospectively may contribute to clarifying to which extent illness perceptions are a manifestation of persistent traits. Finally, this study may contribute to the development of brief interventions in primary care based on the patients' illness perceptions.