CONTROLLING CANCER PAIN: HOW ADEQUATE IS THE GP KNOWLEDGE BASE?

Barclay S (1), Todd C (1), Finlay I (2), Grande G (1), Wyatt P (2).

- (1) General Practice Research Unit, University of Cambridge, UK.
- (2) Department of Palliative Medicine, University of Wales College of Medicine, UK.

Aims.

- 1) To investigate the knowledge of key pain control issues among GPs in Wales.
- 2) To develop a summative scale of GP pain management knowledge.
- 3) To develop a regression model of this GP pain management knowledge scale.

Methods.

Postal questionnaire covering demographic features, with nine questions concerning pain management in advanced cancer. Up to three reminders. For the development of a summative scale, a Delphi panel of 15 GPs and 10 Consultants in Palliative medicine weighted:

- a) the importance of the nine pain questions for GPs, and
- b) the correctness of the responses received.

Using Thurstone methodology, these two weightings were combined to weight respondents' replies, and these summed to give a pain management knowledge score for each G.P.

Results.

Response rate was 67.6%. The pain knowledge summative scale was strongly negatively skewed: 278/399 (69.6%) obtained scores that represented good to excellent answers. Three variables emerged as significant predictors of low-scoring GPs: greater years since qualification, non-membership of RCGP, and graduates of non-UK and London medical schools ($R^2 = 0.192$).

Conclusion.

The majority of GPs have a good grasp of the basics of pain control. Educational efforts are most needed among longer-serving GPs who are non-UK or London graduates, and currently non-members of the RCGP.