A bright—not bleak—future for family medicine

Recently, a medical consulting group published, “The disruption of primary care: How customer-obsessed companies are changing everything.” The essay paints a not-too-rosy picture for the future of traditional family medicine in our Internet-dominated, immediate-gratification-seeking society. They contend: “The future of primary care extends far beyond the physician’s office to pharmacies, supermarkets and retail clinics including CVS, Walgreens, Target and CityMD, as well as virtual care companies such as MDLive and Amwell. Increasingly, Internet and technology companies like Amazon, Google and Apple are showing signs of getting into the healthcare services and information arena. ... These formidable customer-centric companies are primed to become preferred alternative providers of health information and low-acuity services, while lowering the price point of primary care services.”

While it is an interesting piece, I remain bullish on family medicine and believe the future remains bright for those who practice high-quality primary care.

1. Cost efficacy. For common medical conditions, family physicians (FPs) are much more cost-effective than specialty or emergency department care. For example, a young man recently hit his thumb and had a subungual hematoma. He visited an orthopedic physician’s office, where the physician ordered an unnecessary x-ray and sent him home without draining the hematoma. The cost was more than $300. The patient was referred to our office where, later that day, we drained the hematoma with a hypodermic needle at a cost of $90. We all have similar stories of expensive inefective care.

2. Immediate care. Many family medicine groups have responded to the demand for immediate care with extended hours, assigning a doctor of the day, and/or having an open-access schedule that allows for a sufficient number of same-day appointments. Many FPs are now available for “virtual visits,” since Web portals for electronic medical records have become easy to use for secure communication. In addition, many FPs have developed e-consult services to streamlined specialist consultations. At the Cleveland Clinic, an FP leads the primary care telemedicine program.

3. A future that is not mutually exclusive. The authors contend that the future will be a matrix of health care services available via the Internet like the Amazon model. I see that model as fully compatible with excellent family medicine. In such a model, a skilled FP and staff provide timely acute care and chronic disease management; they connect patients to other health-related services and high-quality health care information; and they guide patients through our increasingly complex medical system. Isn’t that what we’re already doing?