

Bureaucracy stifling studies

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A group of researchers whose planned leg ulceration study was hamstrung by a physician recruitment rate of 2% have published the reasons why so many doctors turned them down. The qualitative information, featured in the open access journal *BMC Medical Research Methodology*, should be of use to those designing trials of their own.

Dr. Oliver Herber, from the University of Witten/Herdecke, Germany, worked with a team of researchers to collate the overwhelmingly negative responses received from their potential pool of 1822 medical practices. He said, "Interdisciplinary research studies, especially those between the medical and nursing professions, require careful consideration in the development and tailoring of research designs. To reduce rates of refusal and lack of initial contact, the time, money and effort needed during the planning and recruitment phase of a study must not be underestimated".

Problems identified by Herber and his colleagues include the fact that first contact with most surgeries is through non-medical admin staff who are expert at deflecting all but essential calls. They are especially unlikely to 'put through' non-doctors and may not have a doctor's appreciation for the importance of the study to be carried out. Other factors include GPs' fear of extra work, especially if that work will not be rewarded monetarily, and fear that the results of a study will somehow be used to assess them.

Speaking about the implications of this study for people designing trials, Herber said, "A sustainable and reliable network of teaching surgeries

demonstrating interest in research is vital for the successful execution of scientific studies"

More information: Recruitment rates and reasons for community physicians' non-participation in an interdisciplinary intervention study on leg ulceration; Oliver R Herber, Wilfried Schnepf and Monika A Rieger; *BMC Medical Research Methodology* (in press), www.biomedcentral.com/bmcmedresmethodol/

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