

The doctor will see all of you now? Group doctor visits may be feasible for Parkinson's disease

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Group appointments where doctors see several people for a longer time may be feasible for Parkinson's disease, according to a new study published in the April 27, 2011, online issue of *Neurology*[®], the medical journal of the American Academy of Neurology (AAN).

Group visits have shown benefits for people with other chronic conditions, but have not been evaluated for people with [Parkinson's disease](#). Group visits can allow patients more time with their doctor than they might have with individual appointments and more time for [doctors](#) to provide education on managing the disease.

The randomized, controlled study compared people receiving their normal care from a physician to people receiving care through group visits with their regular physician over one year. Caregivers were also included in the study.

Those receiving their usual care had 30-minute appointments with their physicians every three to six months. The group visits lasted 90 minutes and were held every three months. They included introductions, updates from patients, and an educational session on a topic chosen by the participants. Time was allotted for questions from patients or caregivers and individual 10-minute appointments with the physician were scheduled for before or after the group visit for individual concerns.

Of the 30 study participants, 27, or 90 percent, completed the study, along with 25, or 93 percent of the 27 participating caregivers. At the end of the study, there was no difference between those receiving usual care and those participating in the group visits in how they rated their overall quality of life.

Participants were asked whether they preferred the group visits or usual care at the end of the study. Of the 14 receiving group visits who responded, eight preferred the group setting, five preferred usual care, and one was indifferent. Of those receiving usual care who responded, five preferred group visits, six preferred usual care, and three were undecided. None of the participants reported any confidentiality issues.

Study author E. Ray Dorsey, MD, MBA, of Johns Hopkins University School of Medicine in Baltimore, MD, and a member of the American Academy of Neurology, said group visits have the potential to address limitations of support groups and traditional doctor visits.

"While both support groups and traditional visits have clear benefits, a survey of people with Parkinson's showed that they desire a credible group leader for their support groups and more information for them and their caregivers about their disease," he said. "Group visits can address these limitations. They also give physicians the opportunity to observe their patients for a longer period of time and appreciate disease characteristics such as fluctuations in their symptoms and daytime sleepiness that may not readily be appreciated during a routine 20- to 30-minute office visit."

Dorsey noted that group visits may pose logistical issues, such as the need for a large room and scheduling difficulties. He said that the risk that the lack of a one-on-one examination could lead physicians to miss subtle problems could be resolved by using a hybrid model alternating group and individual appointments.

Stephen G. Reich, MD, of the University of Maryland School of Medicine in Baltimore, MD, who was not involved in the study and wrote an accompanying editorial, noted that the study participants all had mild to moderate Parkinson's disease, suggesting that people with more advanced disease may be less willing to forgo individual appointments.

Provided by American Academy of Neurology

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