

Emergency room or doctor's office?

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A new study in the journal *Heliyon* examines the relationship between the way individuals perceive and respond to threats (threat sensitivity) and where they most frequently seek medical care. The study investigates the association between the healthcare utilization practices of African American men in a low-income urban neighborhood and their

relative levels of threat sensitivity, insurance status, and ages.

"Over 20 percent of US adults do not have a regular source of [healthcare](#) and the reasons for this shortfall are not fully understood. Lack of adequate insurance coverage is a major deterrent, but the significant percentage of insured adults who do not have a regular medical resource suggests that other factors play a role. Understanding all of the factors that contribute to suboptimal healthcare utilization is therefore key to developing solutions to the problem," explained lead investigator Stephen Ristvedt, Ph.D., Department of Anesthesiology, Washington University School of Medicine, St. Louis, MO.

People vary widely in how they perceive and respond to threats. At one end of the spectrum are highly-sensitive individuals who are more prone to anxiety and avoidance of potential harm. At the other end are those who are relatively insensitive to threats and thus more likely to be generally unflustered and may take greater risks with their health and well-being.

Investigators found that too little threat sensitivity could lead to neglect of plausible risks (e.g., not having established a regular healthcare source) while too much could lead to heightened sensitivity to risks (e.g., going most often to an [emergency room](#) for healthcare).

Of the 483 African American men who participated in the study, 67.1 percent said they visited a doctor's office or clinic when they needed [medical care](#), 18.8 percent frequented the emergency room, and 14.1 percent cited "no place." Further data analysis indicated that men who were more likely to cite a physician's office or [medical clinic](#) as their most common source of healthcare were higher in threat sensitivity than men who had no usual place for healthcare and lower in threat sensitivity than men who cited the emergency room as their most common healthcare source.

The study also found that having insurance, being older, and having comorbid conditions were significantly associated with using a doctor's office or clinic rather than an emergency room or not seeking care altogether. The combination of high threat sensitivity and the emergence or worsening of symptoms could conceivably prompt a more urgent pursuit of medical attention and trips to the emergency room.

"These findings are important because they lend insight to tailoring health marketing messages to assist in public health efforts to optimize utilization of healthcare resources. Providers in doctors' offices and clinics are able to monitor and treat chronic diseases on a more regular basis and focus on preventive care, and are more cost effective than the emergency room," noted Dr. Ristvedt. He cited the success of a number of social media campaigns to motivate certain audiences toward healthier behaviors through targeted messages.

The healthcare utilization patterns of African American men, who comprise the study sample, have been shown to be different from those of other US demographic groups. Compared to Caucasians and African American women, African American men are less likely to go to a doctor's office for their healthcare needs and more likely to go to an emergency room. In previous research this has been attributed to racial discrimination and/or mistrust of healthcare organizations and providers. As a result, the investigators expected to find higher levels of both factors associated with suboptimal healthcare utilization through overreliance on [emergency](#) services or underutilization of available services all together. Contrary to this hypothesis, the study demonstrated that these two factors had no impact on healthcare utilization when threat sensitivity, insurance status, and age were taken into account.

Further study is needed to determine whether the findings are broadly applicable across demographic groups. In addition, the investigators recommended conducting additional research to further clarify issues of

causality, assess unmeasured medical variables, and replicate their findings.

More information: Stephen Ristvedt et al, Threat sensitivity is associated with the healthcare source used most often: doctor's office, emergency room, or none at all, *Heliyon* (2019). [DOI: 10.1016/j.heliyon.2019.e01685](https://doi.org/10.1016/j.heliyon.2019.e01685)

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