Consultation Length in Primary Health Care: Is It Getting Longer?
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Primary health care by definition is “the essential care made universally accessible to individuals and families in the community by means acceptable to them, through their full participation and at a cost that the community and country can afford. It forms an integral part both of the country's health system of which it is the nucleus and of the overall social and economic development of the community”1.

With the emphasis on accessibility and cost, primary health care has become the most popular service in Bahrain. In 2007, more than 3 million patients had visited the primary health care compared to 518,287 visitors to the outpatient clinics and accident/emergency department in the secondary health care service2. Being heavily utilized, the Ministry of Health realized the importance of regulating consultation length. After it was 5 minutes per consultation, it was extended to 7.5 minutes in 2006. This was only possible by extending the evening working hours in 20 health centers across the country3.

The aim of this article is to review the current trend of consultation length in primary health care and its effects on clinical outcome.

Consultation Length and Quality

The brevity of consultations in primary health care has always been a concern for both patients and doctors. It has been shown that longer consultation and shorter patients’ list enable doctors to provide a better care4. In longer consultations, prescribing rates and return visits were found to be less4. Hull et al found a clear association between mean consultation length and patient satisfaction5.

Many studies consistently showed that doctors with longer consultation times tend to provide more preventive measures, such as blood pressure measurement or vaginal examination. They also give more advice on lifestyle and other health promoting issues6.

Having more time during consultations has been associated with higher rate of detecting psychological diseases7. Howie et al conducted a cross sectional survey in Britain and found that patient enablement correlates best with the duration of consultations8.

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International Comparison

Consultation length varies not only from one country to another, from doctor to doctor but also from one case to another. While it has been reported to be as short as 3 minutes in some Spanish provinces, it is around 21 minutes in Sweden\(^4,9\). When comparing international figures, we find that doctors in this region provide the shortest consultation time, see Figure 1.

![Figure 1: Consultation Length in Different Countries across the World\(^4,10,11,12\)](chart)

The UK is in-between with a mean of 9.4 minutes\(^10\). Belgium and Canada have a better record of 15 minutes\(^11\). It is disappointing to find primary health care systems in our region provide the least time for consultations. The United Arab Emirates record is 5.5 minutes, Saudi Arabia comes second with a mean of 5.69 minutes while Qatar’s mean is 6.55\(^12\). All these figures have been calculated through cross sectional and observational studies. Unfortunately, no study has been conducted yet in Bahrain to measure the actual mean time of consultations in primary health care, though the official time given for each patient is 7.5 minutes\(^2\).

Clinical Consideration

While some authorities focus on the length of consultations, others believe in the quality. The argument is that even in short consultations time, the patient can be managed effectively. It is the content of consultation and how the doctor approaches his patient that matters. Some studies found that lengthening the consultation did not affect the patient’s satisfaction\(^10\). Therefore, it is crucial to increase the awareness among physicians about the importance of patient centered consultations.

Recommendations
It has been two years since the official consultation length has been extended to 7.5 minutes in Bahrain. A new patient’s satisfaction study would reflect any measurable changes compared to previous studies\(^\text{13,14}\).

A study measuring the actual mean time spent during consultation in our health centers is also required, besides studying the characteristics of patients relative to the length of consultations. Finally, to consider all strategies which are known to improve the quality of care such as implementing Continuous Quality Improvement (CQI) and human performance technology which proved successful after being implemented in one of the health centers in Bahrain\(^\text{14}\).

**CONCLUSION**

Longer consultations have been linked to a higher satisfaction rate. Nevertheless, each patient requires a different amount of time to receive the appropriate management. The quality of care during the consultation should meet the patients’ satisfaction.

**REFERENCES**