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PROFESSION

Physician background doesn't tell the whole quality story

Patients need better information than education and other credentials to help find the right doctor, a new study says.

By KEVIN B. O'REILLY, amednews staff. Posted Sept. 27, 2010.

The information patients typically use when looking for a new doctor is not very helpful in determining physician quality, according to a new study of more than 10,000 Massachusetts physicians caring for 1.1 million patients.

Researchers found little correlation between physician performance on 124 process-based quality measures in 30 clinical areas and characteristics such as medical education, board certification, malpractice claim payments and disciplinary actions commonly listed by health plans and consumer websites.

"The physician characteristics available for patients to choose doctors don't actually predict which ones will deliver high-quality care," said study co-author Rachel O. Reid, a Doris Duke Clinical Research Fellow at the University of Pittsburgh School of Medicine. "You can't judge a book by its cover."

Physicians who were female, board-certified or trained in the U.S. scored better in quality performance, but the differences were small, said the study, published in the Sept. 13 *Archives of Internal Medicine*.

For example, the average board-certified, U.S.-trained female physician scored only 5.9% better on performance measures than a noncertified, foreign-trained male doctor. There were no statistically significant quality differences when comparing physicians who made malpractice claim payments versus those with no such record. Doctors who graduated from U.S. medical schools ranked in the top 10 by *U.S. News & World Report* scored no better on the quality measures than physicians who did not.

The 124 quality metrics gauged physician adherence to widely accepted clinical guidelines such as offering adult women a Pap smear every three years and giving patients with diabetes a glycosylated hemoglobin test every six months.

For physicians, the message is that quality is more about what they do in the office than the credentials that hang on the wall.

"You can feel secure in the fact that some of these varied demographic characteristics that are used to judge one physician from another don't matter much in the end," Reid said. "Physician practice patterns are more complex than you can just glean from a quick look at their resume."

This content was published online only.

ADDITIONAL INFORMATION:**WEBLINK**

"Health Care Reform: Associations Between Physician Characteristics and Quality of Care," *Archives of Internal Medicine*, Sept. 13 (archinte.ama-assn.org/cgi/content/abstract/170/16/1442)

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