

Impact of the COVID-19 Pandemic on Reasons for Visits to Primary Care in INTRePID countries



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INTRODUCTION

The COVID-19 pandemic threatened the delivery of primary care services worldwide.^{1,2} Previously, the International Consortium of Primary Care Big Data Researchers (INTRePID) found a drop in in-person visits to primary care mitigated by virtual care.³ We explored if this uptake of virtual care continued during the second year of the pandemic and if there were changes in reasons for visits to primary care during the pandemic. virtual care continued during the second pandemic year.

METHODS

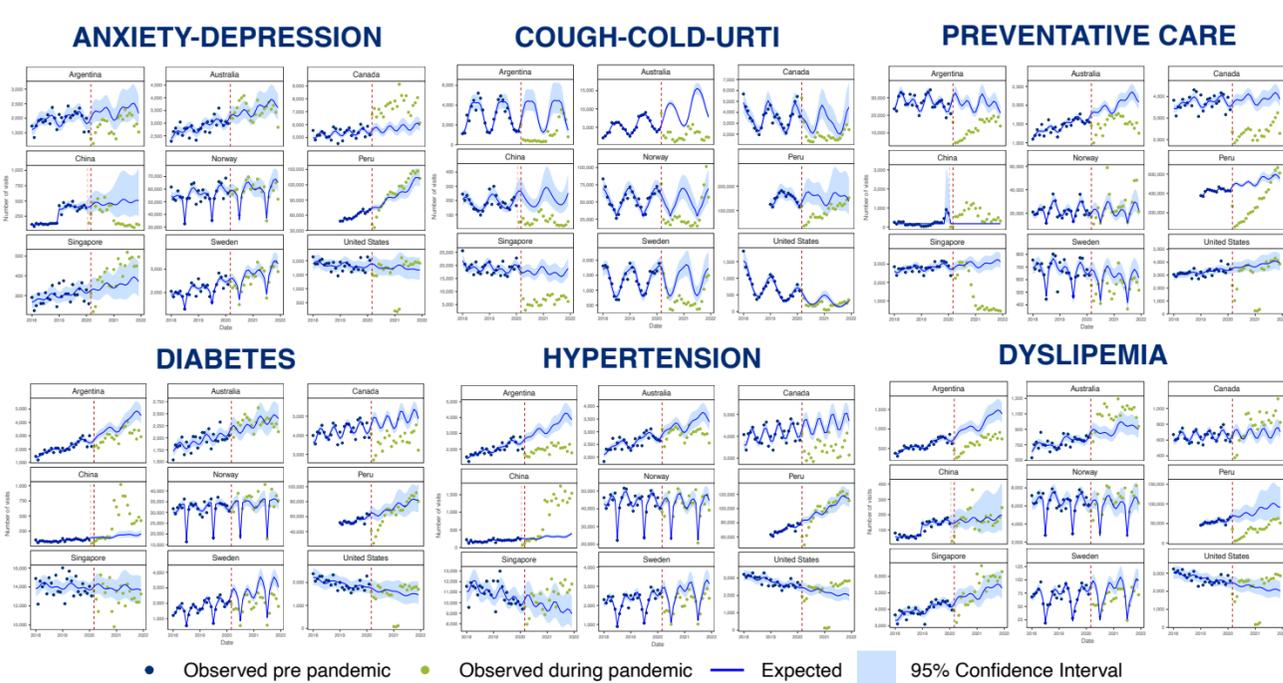
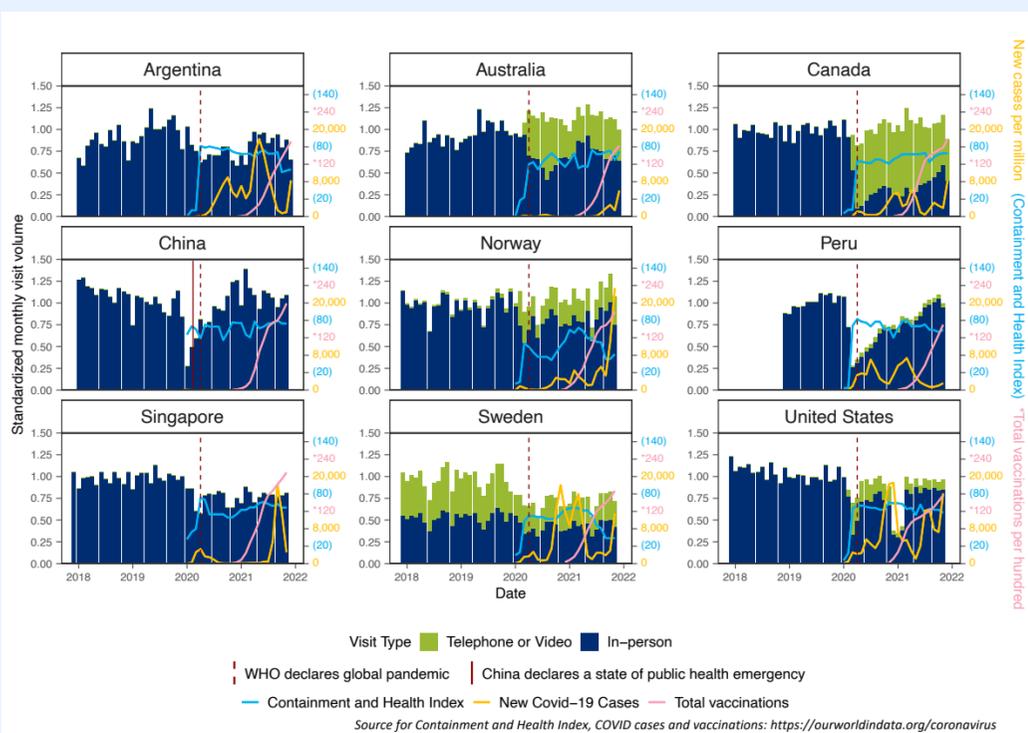
Cross-sectional retrospective analysis on patients seen in primary care settings between 2018-2021 in Argentina, Australia, Canada, China, Peru, Norway, Singapore, Sweden, and the USA.⁴ Monthly visit volumes and rates, overall and for common conditions, pre-pandemic and during the pandemic were assessed. Expected visit volume in the pandemic period using negative binomial models fitted to the pre-pandemic data for preventative care visits and common diseases was also examined.

RESULTS

Overall, there were over 215 million visits by over 38 million patients to primary care settings in INTRePID countries between 2018 and 2021.

VISIT VOLUME AND MODALITY

- Monthly visit rates decreased in the first year of the pandemic in Argentina, China, Peru, Singapore, Sweden, and the USA (RR:0.57 [95% CI:0.49, 0.66] to RR:0.90 [95% CI:0.83-0.98]).
- In countries with virtual care, monthly virtual visit increases ranged from a low in Peru at 7.5% (SD 1.7%) in the first year and 5.3% (SD 0.7%) in the second year to a high in Canada of 75.8% (SD 6.6%) in the first year and 62.5% (SD 9.3%) in the second year of the pandemic.



COMMON DISEASES

Anxiety and Depression visits were higher than expected in Australia, Canada, Peru and Singapore.

Cough and cold visits were lower than expected in all countries during the pandemic.

Preventative care visits were lower than expected in all countries, except China and Norway during the pandemic.

CONCLUSIONS

The rapid introduction of virtual visits mitigated the visit volume disruption in many countries and was sustained throughout the second year of the pandemic. The pandemic resulted in changes to what is seen in primary care and how it is delivered.

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