



I Have a Gut Problem: Which Healthcare Provider Should I See?

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When suffering from ongoing gastrointestinal (GI) symptoms, you may find it difficult to choose or find a healthcare provider. Modern health care systems are complex, and without guidance it is often difficult to find one's way among the variety of specialists, clinics, hospitals and rules that manage a community's health care establishment. If a person is very ill, the local hospital's emergency room is a logical choice because they have the equipment and healthcare providers for those needing urgent care. But emergency rooms are not the correct place for the care of chronic illnesses. Chronic illnesses require time and continuing care. Therefore, a practicing healthcare provider or clinic prepared to spend the necessary time and offer continuing care is ideal.

The type of healthcare provider or clinic that you visit may depend greatly upon where you live and the rules of your health care plan as well as favorable characteristics that you might consider.

Your Health Care System

Most people, even healthcare providers and politicians, are surprised when they learn how much health care systems differ from one to another. Medical science is universally available and accepted in developed countries, but societies have devised many ways to deliver it. To make things more complicated, each system is constantly revising itself in response to social, demographic and economic pressures. This article will not venture a comparison of the quality of the developed world's health care systems, but it is safe to say they all have limitations. Critics worry that managers, concerned with costs, sometimes lose sight of the reason for their existence –the patient.

In Britain and Canada, for example, ill people are encouraged to first consult a family healthcare provider (general practitioner in Britain). One is then referred to a specialist if deemed necessary. In this case, the patient will have professional advice about which specialist to choose. Some European national systems have or are moving towards this model. In Canada, if a specialist accepts a patient not referred by a healthcare provider, he or she may not charge specialists' fees.

In the United States, there is no universal health care system, although Medicare and Medicaid and even the Veteran's Affairs program are national in scope and care for

the aged and many of the disabled. For most others there are many health maintenance organizations, preferred practitioner organizations, private and state government insurance programs and employer or non-profit plans, each issuing their own rules about access and healthcare provider activities. Some plans employ the family healthcare provider as gatekeeper; that is healthcare providers are penalized if they refer or order tests beyond a certain norm, or if they see their patients too frequently. Clinics are paid according to the patients they accommodate, and for economic reasons may limit the time healthcare providers spend with each patient. Since many health care plans are engaged through an employer it may be difficult to change either the plan or the healthcare provider(s) you must see. Detailed description of health care funding is too complex for an article such as this, but the first rule in seeking care is to understand your own health care coverage and what healthcare providers it permits you to see.

Health care systems aside, there are several issues to consider when choosing the type of healthcare provider you will see for your chronic intestinal symptoms and what their personal characteristics should be.

What Type of Healthcare Provider?

It may seem a no-brainer to call a gastroenterologist for gut pain. However, organs other than the gut reside in the abdomen, and choosing the wrong specialist may waste time and lead to inappropriate testing and treatments. Conversely, if the pain is deemed to be in the pelvis, one may be misdirected to a gynecologist or urologist. Women with IBS are more likely than others to have gynecological surgery. Similarly, irritable bowel syndrome (IBS) patients are more likely than others to have surgical removal of their gall bladder – sometimes not a good thing, and irrelevant to their IBS. While an association of abdominal distress with altered bowel habit may suggest a gut disorder, most people should seek guidance in their choice.

Another difficulty with specialists is that they are trained in diagnostic and remedial procedures and to offer opinions to a referring healthcare provider. Most are unprepared or insufficiently compensated for long-term care, and patients with functional gastrointestinal disease may need regular visits. Such patients are numerous, and providing continuing

care for many can compromise a specialist's principle role in diagnosis and procedures.

As we age, we may accumulate diseases. A young person's only symptom may be belly pain. However, as they pass middle age, arthritis, high blood pressure, varicose veins, eczema and many other diseases become common. The specialist route means visiting several healthcare providers, who may be unaware of each other's actions. While sometimes unavoidable, such a policy may be costly, time-consuming and increase the risk of counterproductive measures. Some treatments for high blood pressure or arthritic pains may adversely affect the gut. Certain stomach medications may alter the metabolism of other drugs. It is neither uncommon for the elderly to be prescribed more medication than they can keep track of, nor for their specialist healthcare providers to be uninformed about their entire medical economic, social, and psychological status.

Most people should receive their primary care from a family healthcare provider, although some specialists may assume this role in certain cases. A healthcare provider offering primary care must be familiar with chronic disorders affecting all body systems and should be in a position to know the patient's entire medical history and his or her psychosocial, economic, and family background. In chronic, painful disorders, the symptoms are often intertwined with daily living. These can profoundly affect each other, and healthcare providers can best help patients when they take them all into account. Of course, family healthcare providers cannot be expected to know everything about every condition. That's why we have specialists. The wise primary care healthcare provider will refer to a specialist for an opinion or diagnostic evaluation, when necessary, but subsequently stand ready to act on the specialists' information and provide ongoing care. In custody of a patient's complete medical record and a list of current and past medication including untoward effects, a primary care/family healthcare provider should be best positioned to provide comprehensive and safe care.

Nevertheless, such a healthcare provider may be difficult to locate. Many family healthcare providers, especially those working part time, work in walk-in or hospital clinics where the record is incomplete. Moreover, a patient may see a different healthcare provider each visit, to some extent diminishing the family healthcare provider advantage. In many places such as in my Province of Ontario, previous government policies have led to a critical shortage of family healthcare providers and many people find existing healthcare providers too busy to accept them. Such a crisis exists in the United States as well. A symposium published in the New England Journal of Medicine cites many reasons why medical students do not choose family practice as a career. Most health care systems need improved compensation, working conditions, and esteem for their family healthcare providers.

What Sort of Person Should my Healthcare provider Be?

Whether your healthcare provider is a family healthcare provider or a specialist, there are certain characteristics that bode well for the satisfactory care of your chronic disorder.

- Is your healthcare provider empathetic and do they listen attentively as you explain your symptoms? Do they believe that you have a real disorder? If you get the impression your healthcare provider thinks your symptoms are trivial or "all in your head," it's time to move on.
- Is your healthcare provider able to spend time discussing and explaining the problem?
- Does your healthcare provider order many tests, but fail to explain the reason for them and the meaning of their results. Do they readily explain when asked?
- Does your healthcare provider regularly order medication or diets without explanation of their risks and benefits – for there are few cures in chronic gut disease, and in general the fewer drugs the better. Do they readily explain when asked?
- Are you able to get an appointment within a reasonable time? Is your healthcare provider usually available, or do you often see a stand-in who is unfamiliar with your case.
- Does your healthcare provider seem knowledgeable about your problem, yet ready to seek a specialist's advice for difficult issues? Perhaps most importantly does the healthcare provider inspire confidence, and establish a good rapport?

No healthcare provider is perfect, but the above questions should help you decide. Remember, you are not permanently tied to your healthcare provider. It is your right to find a new one and have your complete medical record transferred. On the other hand, too many changes can be counterproductive. If you are experiencing a problem with a healthcare provider, talk to them about the issue to see if a resolution can be found before deciding to move.

Conclusions

For chronic disorders, choosing a healthcare provider can be difficult, especially if long-term care is contemplated. In general, a family or primary care healthcare provider is best prepared to assume this role, using appropriate specialist referral if necessary. The choice is influenced by the type of medical care coverage you have, and the availability of appropriate healthcare provider. Ideally, your healthcare provider should:

- know your entire medical history,
- recognize the importance of your symptoms,
- empathize with your discomfort, and
- be prepared to spend the necessary time explaining their meaning.
- be available when needed

- be frugal and deliberate with tests and treatments
- be their patient's advocate.

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