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Over many years, a group of general practitioners in Arendal have made contributions to practice-related clinical research. Should more doctors follow their example?

In praise of Grandgården

In March 2013, the participants in the introductory course «Research in general practice» in Oppdal were asked whether they had engaged in research or could imagine doing so. No hands were raised. In 1996, I held the same course at Lyngør, where Gunnar Mouland (born 1948) earned praise for an article that had recently been accepted for publication by the Journal of the Norwegian Medical Association (1). Mouland is one of several enthusiastic medical practitioners who are also proficient writers in the Legegruppen Arendal [Arendal Group of General Practitioners] (formerly Legegruppen Grandgården [Grandgården Group of General Practitioners]) (2). By shedding light on important clinical problems in general practice, they may rightly serve as a beacon for others (3, 4). Their approach coincides well with the concerns of patients' associations and user groups (5).

The establishment of departments of general practice and public health in the four faculties of medicine during the period 1968–1975 and the short-term scholarship scheme for general practitioners were important prerequisites for Mouland and other GPs with an interest in research. Both were instituted as a result of professional and financial support from the Norwegian Medical Association. Mouland succeeded because of the scholarship scheme and – just as importantly – a solid project and two congenial supervisors, Christian Borchgrevink (born 1924) and Olav Rutle (1945–1996). The short-term scholarships remain popular, and the number of months applied for consistently outstrip the available funding (6). The Research Fund for General Practice was established in 2007. Like the short-term scholarships, its funding is based on annual transfers from the tariff bargaining rounds. In 2010, a total of 33 projects shared the NOK 16 million that were available. In spite of the high prevailing interest, the transfers have declined, and in 2013 the board granted nearly NOK 11 million out of the total available funding of NOK 13.7 million (7).

General practice research is currently enjoying an upswing because of two innovations in particular: the establishment of four general practice research units (AFE) in 2006, with core funding from the state budget, as well as a National Research School in General Practice Medicine, which was launched in 2013. The general practice research units are co-located with the institutes of general and community medicine, but as long as they remain externally funded, they operate in principle independently of the department's other assignments, such as teaching. This is an unusual form of organisation, since the research units will also set the premises for the evidence-based teaching of general practice medicine. Seen from the outside and compared to the hospital disciplines, general practice research is weakly positioned (8). A further challenge is that on the

one hand, the units are expected to raise the profile of this research in academic circles, while at the same time maintaining its legitimacy among clinicians on the other. The fact that the Arendal doctors have been accepted into the warmth of the university (9) is a move in the right direction, and it is positive to see that more applicants have received grants repeatedly and gone on to submit their PhD degrees. The research units have been met with enthusiasm by the academic institutions, their activity is high and so is the diversity of topics and methods. I will nevertheless raise the question of whether there is a limit to what can be counted as general practice research (10).

In the autumn of 2012, the Research Council of Norway granted NOK 24 million to a national research school in general practice medicine for the period 2013–20. The initiative came from the universities, and the school will cooperate with the academic institutions. One of its objectives is to arrange courses and sessions for young PhD candidates as a supplement to the institutions' own programmes. The Institute of Health and Society at the University of Oslo coordinates the courses. This innovation is intended to «promote a high international standard in general practice research training for the benefit of general practice research and a creative and sustainable research environment» (11). This echoes the attitudes of the institutes as well as those of the research units. We are likely to come across many of their representatives in many the time to come.

The research schools have not been universally embraced (12). I hope that they succeed in establishing a national environment and developing theories and methods that are «applicable for investigating specific medical problems in general practice» (11). Here, many questions remain unexplored. What is essential is to link the most appropriate methods with relevant research questions that are grounded in practice (5). Many new and competent research supervisors are also needed for more hands to be raised at later introductory courses. At the same time, the academic institutions need to court far more general practitioners than simply those in the Legegruppen Arendal, in a way that conjures up enthusiasm, including among clinicians.

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