



Online health

Is this the end of family medicine?

Roger Ladouceur MD MSc CCMF FCMF, ASSOCIATE SCIENTIFIC EDITOR

During the past few years, there has been a dramatic increase in recourse to online health information, commonly referred to as *e-health*. Not only do most of our patients have Internet access, but many of them consult websites dedicated to answering questions that have traditionally been asked of family physicians.¹ These days, it is not unusual to see a patient who, after doing some online research, knows almost as much as we do about his or her health issue. This is more likely to be true if the patient has a serious condition about which medicine seems to be at a loss. Who has not seen a patient with a debilitating disease—advanced cancer, amyotrophic lateral sclerosis, Parkinson disease—who learned about some new, promising, and groundbreaking treatment online? Think of the interest in Paolo Zamboni's technique for treating chronic cerebrospinal venous insufficiency in patients with multiple sclerosis. Many patients traveled outside Canada to have stents inserted, even though the scientific evidence failed to demonstrate the benefits of this intervention and most physicians had never heard of it. This is completely understandable: who among us would not do the same if we were dealing with a serious or fatal disease?

Expert patient

In just a few years, we have moved from the “patient patient” to the “impatient patient” to the “partner patient” and, now, to the “expert patient.”² Today, anyone searching online will likely find whatever information he or she is so desperately looking for, whether it relates to the use of stem cells for cardiac regeneration following myocardial infarction or for the treatment of osteoarthritis or Alzheimer disease; or the use of gene therapies to treat leukemia or cystic fibrosis. The truth is, these days there is no limit to what we can hope for. It is now possible, as some say,³ to imagine that we are on the brink of “the death of death.”

Obviously, some people will say that you can find anything on the Internet—good or bad. However, with the emergence of websites that are directly linked to large health organizations such as Choices, from the

United Kingdom's National Health Service,⁴ Doctissimo,⁵ and the Health On the Net Foundation,⁶ we must admit that the information on these sites is usually credible and valid.

Family physicians and e-health

This brings us to the role of the family physician in response to the emergence of online health information. How can a physician who is not an expert in any of these diseases, let alone their specific treatment, continue to be relevant? What does he or she know of personalized, customized gene therapy or stem cell therapy? How can a family physician, whose goal is to deliver continuous and comprehensive care, as opposed to specialized and ultra-specialized care, still help patients?

Perhaps this is the beginning of the end of family medicine as we have known it. At the same time, enhanced family medicine skills programs will continue to quickly expand and grow. Each of us will become a “mini-specialist” in a narrowly defined field—the result being that health care will become increasingly fragmented.

Or perhaps we will continue to be the only professionals able to deliver comprehensive and continuous care; the only ones able to help, guide, and advise; the only ones able to give patients the straight facts; the only ones able to navigate the maze of knowledge that e-health offers us.

Only time will tell. 

Competing interests

None declared

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