Awards season



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Don't worry when you are not recognized, but strive to be worthy of recognition.

Abraham Lincoln

he month of November and Family Medicine Forum (FMF) mean that it is awards season in the world of family medicine. During FMF, to be held this year in Vancouver, BC, awards will be presented for everything from Family Physicians of the Year to research awards.¹

In general there are 2 kinds of awards: prospective and retrospective. The Longitude Prize is one of the few examples of prospective awards. The original Longitude Prize was a system of inducements offered by the British government to solve the problem of determining longitude at sea.2 The current Longitude Prize offers £10 million toward the creation of a diagnostic test that helps solve global antibiotic resistance.3

Most awards are retrospective, recognizing the quality and value of work already done. Each year Canadian Family Physician (CFP) presents a retrospective award for the Best Original Research Article published in the journal in the previous year. In presenting this award each year, CFP hopes to recognize and reward research excellence in family medicine, improve clinical care, promote and support the career development of family medicine researchers, and enhance the reputation and value of CFP among readers.

Not surprisingly, choosing the winner of the CFP Best Original Research Article award is challenging. Canadian Family Physician publishes about 70 original research manuscripts annually from which a long list of about a dozen articles is chosen by the editors. Considering that CFP publishes research ranging from randomized controlled trials^{4,5} to systematic reviews⁶ to health services research,7,8 and that the journal publishes quantitative, qualitative, and mixed-methods research, choosing the winning article can be like comparing apples to oranges.

Factors considered in creating the long list are the research question and its relevance to practice, and the quality and validity of the work. A short list of 6 to 8 articles is then sent to members of CFP's Editorial Advisory Board for blinded review. In spite of our attempts to make choosing the winning article as objective as possible, there are usually 2 or 3 articles in close contention. Thus, the winner is chosen after face-to-face discussion at the spring Editorial Advisory Board meeting. However, from time to time high-quality research with the potential to change practice might miss the final cut.^{5,9}

Cet article se trouve aussi en français à la page 868.

Over the past decade winners of the CFP Best Original Research Article award have included studies aimed at answering important clinical questions such as whether the use of clinical decision rules or rapid streptococcal antigen detection tests (alone or in combination) can lower the number of unnecessary prescriptions for antibiotics for adults with acute sore throat4 or whether intra-articular steroid injections are an effective treatment for knee pain.6

Past winning articles have also examined models of health care using chart audits to evaluate the quality of care provided by family physicians for acute myocardial infarction in rural Alberta⁷ and to examine primary care physician screening, treatment, and control rates for hypertension in Ontario and whether the type of physician payment model affected these rates.8 The latter work by Tu et al was one of the first published studies examining the effect of new models of primary care physician payment on quality of care.

This year's award-winning paper is a first—a case series of 8 young First Nations patients diagnosed with acute rheumatic fever, a preventable condition, that reveals the social inequalities that "bite the heart" of First Nations children. 10 It was accompanied upon its publication by a call for radical change in health care provision for First Nations people.¹¹

In spite of the challenges and the imperfections in the process, CFP is proud to support this annual award. The award provides support for the lead author to attend FMF and present his or her paper at the combined education and research day on the opening Wednesday of the conference. It is an honour to play our part in celebrating the scope and value of family medicine research in Canada. #

References

- 1. College of Family Physicians of Canada. Past recipients. Mississauga, ON: College of Family Physicians of Canada; 2015. Available from: www.cfpc.ca/Past_Recipients. Accessed 2016 Sep 26.
- 2. Sobel D. Longitude. The true story of a lone genius who solved the greatest scientific problem of his time. New York, NY: Bloomsbury Books; 2007.
- 3. Longitude prize [website]. London, UK: Nesta. Available from: https://longitudeprize.org. Accessed 2016 Sep 26 4. Worrall G, Hutchinson J, Sherman G, Griffiths J. Diagnosing streptococcal sore throat in
- adults. Randomized controlled trial of in-office aids. Can Fam Physician 2007;53:666-71 5. Munoz JE, Miklea JT, Howard M, Springate R, Kaczorowski J. Canalith repositioning maneuver for benign paroxysmal positional vertigo. Randomized controlled trial in
- 6. Godwin M, Dawes M. Intra-articular steroid injections for painful knees. Systematic review with meta-analysis. Can Fam Physician 2004:50:241-8.
- 7. Domes T, Szafran O, Bilous C, Olson O, Spooner GR. Acute myocardial infarction. Quality of care in rural Alberta. Can Fam Physician 2006;52:68-9. Available from: www. cfp.ca/content/52/1/68.full.pdf. Accessed 2016 Oct 3.
- 8. Tu K, Cauch-Dudek K, Chen Z. Comparison of primary care physician payment models in the management of hypertension. Can Fam Physician 2009;55:719-27
- 9. Allan GM, Kraut R, Crawshay A, Korownyk C, Vandermeer B, Kolber MR. Contributors to primary care guidelines. What are their professions and how many of them have conflicts of interest? Can Fam Physician 2015;61:52-8 (Eng), e50-7 (Fr).
- 10. Gordon J, Kirlew M, Schreiber Y, Saginur R, Bocking N, Blakelock B, et al. Acute rheumatic fever in First Nations communities in northwestern Ontario. Social determinants of health "bite the heart." Can Fam Physician 2015;61:881-6
- 11. Guilfoyle J. Out of sight, out of mind. Can Fam Physician 2015;61:833-4 (Eng), 841-2 (Fr).

family practice. Can Fam Physician 2007;53:1048-53.