

Impact of COVID-19 Pandemic on Healthcare Seeking Behaviour in Public Primary Care: a Retrospective Study in New Territories East Cluster

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INTRODUCTION

Studies have revealed the pattern of healthcare seeking behaviour changed during the COVID-19 pandemic, with a reluctance to visit health care facility. This leads to concerns about the care of non-COVID patients, especially those with long term health conditions. Local data has shown a substantial drop in daily emergency room and specialist out-patient clinics attendance since Jan 2020. To date, there has been less understanding about its impact on public primary care service.

OBJECTIVE

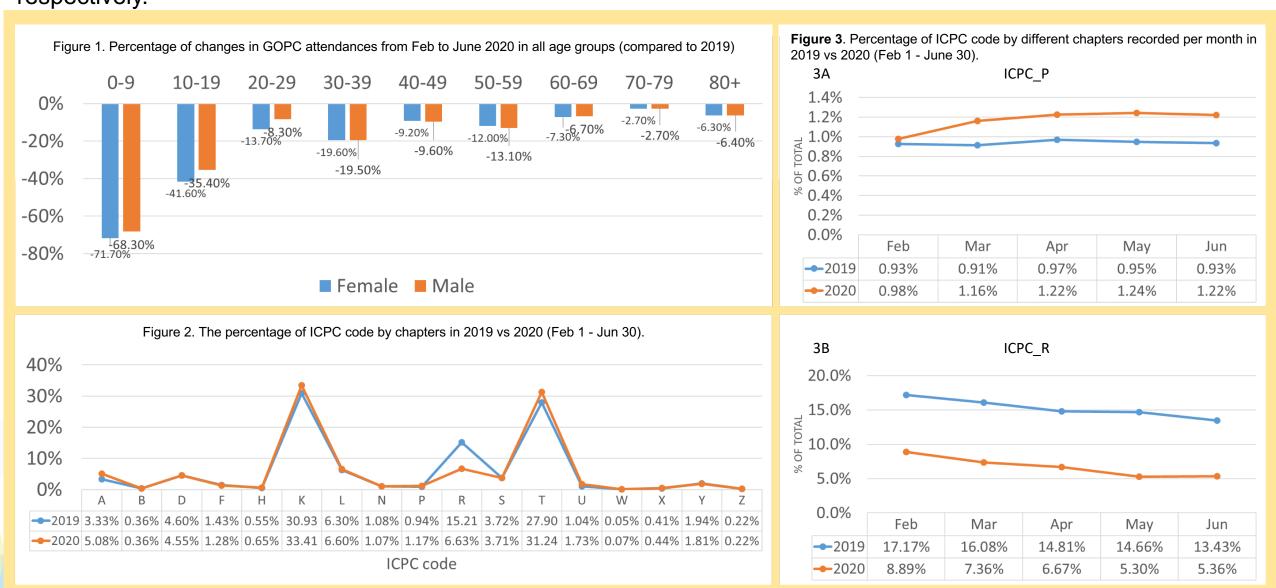
To evaluate the change in presenting problems in public primary care sector, as measured by the number of attendances and the disease patterns during first and second waves of COVID-19 surge in 2020.

METHODOLOGY

We performed a retrospective analysis on routinely collected data from all New Territory East Cluster (NTEC) primary care clinics from clinical data analysis reporting system (CDARS) in a period from 1/2/2020-30/6/2020, and compared it to the same period in 2019. Total number of attendance, sex, age and International Classification of Primary Care (ICPC) codes were retrieved.

RESULTS

- ✓ Comparing with the data in 2019, the data in 2020 showed that the total number of general out-patient clinics (GOPCs) attendance decreased in all age groups, with an overall reduction by 10.3% (347,007 vs 386,759).
- ✓ There was no difference identified between female and male in all age groups in the reduction of number of attendance. (Figure 1).
- ✓ The percentage of ICPC code by different chapters in 2019 vs 2020 were shown in Figure 2.
- ✓ A significant reduction in the number of ICPC R (respiratory) coding was recorded (-58.9%, p< 0.001, Figure 3A) with a 70.6% drop of the number of cases diagnosed as upper respiratory tract infection (R74). The drop in "R" coding could be related to the improved measures of our personal hygiene.</p>
- ✓ A remarkable increase of P (psychological) coding was observed (17.4%, p< 0.001, Figure 3B), with the largest increase occurred in May 2020.
- ✓ Although we observed an overall reduction in numbers of consultations, the number of chronic disease coding, such as K86/K87 (uncomplicated and complicated HT) and T90 (non-insulin dependent DM) increased by 0.8% and 2.4%, respectively.



CONCLUSION

- ✓ An uptake of P coding suggests there is an increasing service demand, implying that clinical service with focus on dealing with COVID-19 related mental health issues should be implemented in primary care.
- ✓ Even though there was an overall modest drop of attendance, the drug refill system at GOPC has largely maintained the clinical service of patients with chronic diseases.