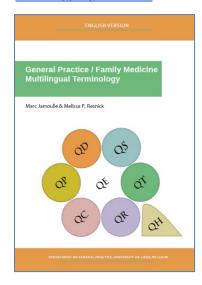
Terminology / Press release

GENERAL PRACTICE / FAMILY MEDICINE MULTILINGUAL TERMINOLOGY - ENGLISH VERSION By Marc Jamoulle and Melissa Resnick

Care Editions, Jumet, Belgium, December 2016, 62p. Color, available at the lowest price possible on the site of the printing office; http://www.publier-un-livre.com/fr/le-livre-en-papier/349-general-practice-family-medicine-multilingual-terminology-english-version



Behind this book is an online knowledge base, maintained by Professor Stefan Darmoni and his team on the HeTOP site of the Department of Information and Medical Informatics (D2IM) of the University of Rouen (France). Professor Gustavo Gusso from Primary Care Unit of Sao Paulo university (Brazil) has written the international preface. Professor Thomas Kuehlein, professor of family medicine in Erlangen, Germany has accepted to be entitled of the English preface.

Marc Jamoulle, already co-author of the International Classification of Primary Care (ICPC-2), has been a generalist in Belgium for 42 years and is pursuing a doctorate in medical sciences at the University of Liège. This book is a result of his research. Melissa Resnick is a medical librarian, Ph.D. Candidate (Health Informatics) at the University of Texas, Health Science Center at Houston, School of Biomedical Informatics, Houston, TX USA.

The terms defined in this online dictionary are intended for web 3.0 applications (hence the terminology nomination but not yet ontology) and appear in English in the book. The same book and the same knowledge base are available in French, Spanish, Portuguese, Dutch and Vietnamese thanks to the voluntary work of some twenty family doctors of the world. These terms are derived from qualitative research. The first author analyzed the content of summaries of contributions of general practitioners and family physicians at European congresses of the discipline held in France, Portugal, Belgium and Switzerland. He extracted 182 concepts, each carefully documented in a terminology record on the Rouen server (www.hetop.eu/Q - free registration required). The whole process is described in the book and only one of the 182 terminological records is reproduced in full in the latter. As taxonomy is in itself a rather boring matter, the book has been made more attractive by adding photographs of patients and doctors of the world.

This way of identifying knowledge makes it possible to know precisely what family doctors discuss when they exchange on their work. This bottom-up approach shows the complexity and breadth of this demanding profession. The whole work is also documented on the site http://3cgp.woncaeurope.org where one can freely download the terminology and Q-Codes in 8 languages, the 6 already quoted as well as Turkish and Korean. (All available under Creative Common 4.0 license)

Each term corresponds to a notation called Q-Code, an identifiable and codable concept in texts. The association of Q-Codes and the ICPC-2 can serve as a means of indexing for general medical congresses. General and family medicine becomes a discipline. Although well-defined but not very well harmonized, it produces here its first international table of content.

Several experiences with the use of ICPC-2 and Q-Codes are underway. In Belgium, trainees in family medicine will use them to index their final studies. In Rouen, Professor Darmoni's team tests the capacity of an automatic language processing system to index future congresses by machines. In Brazil, submissions of abstracts to the next Brazilian Society of Family and Community Medicine (SBMFC) conference will include indexing by these two tools. The Wonca International Classification Committee, which also produces the ICPC, opened its site to a working group on Q-Codes. (www.ph3c.org/Q).

Despite its origins in family medicine this book and its knowledge base will interest students, professionals and teachers from all sectors of health care. The areas covered are wide and the reader will find detailed information on topics as diverse as continuity of care, violence against women, patient autonomy, quaternary prevention or indoor pollution.