



Interview with Dr Igor Zastavnyy, Ambulatory of Family Medicine

Dr Igor is a family doctor based in Krakovets, Yavoriv region, Lviv oblast, Ukraine. BMJ interviewed him recently to hear about his experience using BMJ Learning and BMJ Best Practice.

Before you accessed the BMJ resources, how different was your practice compared to the evidence-based guidelines in the BMJ resources?

I have used mainly local guidelines in my practice, however they are not updated. Some are over 10 years old and I am not sure that they are evidence based.

How many different documents and guidelines do you currently have to refer to in your clinical practice?

Too many, definitely over 50. It is difficult to keep up as a result.

How often do you have to take decisions that are not fully in line with national guidelines?

Every day because our local guidelines are not always updated or reliable.

How long does it take usually to get acquainted with one particular guideline for a specific disease?

The local guidelines are very long. It would take me about a half day to a day to learn one guideline thoroughly and I tend to look at the guidelines monthly to refresh my knowledge.

Did you apply the new knowledge from the BMJ content in your clinical practice?

Yes I did on a number of occasions. I am now treating chronic heart failure according to the evidence based recommendations outlined in BMJ Best Practice. I am using digoxin less as it doesn't improve longevity and I am also now using beta blockers appropriately.

In patients with type 2 diabetes, I now understand step-by-step treatment and how to use drugs appropriately and when to add new drugs.

Recently I saw a young patient with rheumatoid arthritis. She had visited other clinics and was receiving treatment with methotrexate but it wasn't helping her pain. She had seen a few different doctors who had all continued the same treatment. According to the guidelines on the BMJ resource, I saw that we could try combination therapy for her. I have started this and her condition is now much improved.

In chronic obstructive pulmonary disease we have now changed how we make the diagnosis according to the BMJ advice. We now use peak flow measurement and spirometry in diagnosis.

Did the BMJ resources help you to practice in line with evidence based guidelines?

Yes they have. I can rely on them because they are evidence based and now I use them in my practice all the time.

Was it faster or more efficient to use the BMJ resources?

Using BMJ resources is very quick and efficient. I often use them in a patient consultation. I can simply login and get the guidance I need.

What did you think of the quality of the content on cardiology?

I thought the content was perfect. I liked the simplicity of the content most, I can easily find step-by-step guidance and this is very convenient for me. I especially liked the patient leaflets and translated some of them to give to my patients.

Was the content easy to access?

It was extremely easy to use the BMJ website I could simply login and find the information I needed.

Do you have any further comments or thoughts you would like to share?

I think doctors throughout Ukraine could benefit from access to BMJ Best Practice and BMJ Learning. I would like to see BMJ resources translated into Ukrainian so they would be more accessible for all doctors.

Would you like to share your feedback with BMJ?

Please email Kate Shanahan, kshanahan@bmj.com