

PRIMARY CARE IMPROVES LIFE EXPECTANCY AND HEALTH

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Globally, longevity continues to increase as we advance in our ability to prevent and treat illness. In the United States, however, we continue to lag behind other high income nations despite being amongst the top world competitors in medical advancement. No doubt our lack of social protection programs in comparison to other countries plays a large role, but second to such a deficit is our failure to provide adequate and equitable primary care (7, 17).

Access to primary care is directly associated with improved outcomes across different ailments including infant mortality and morbidity (6), cervical cancer (4), colorectal cancer (5), stroke (17), and cardiovascular disease (7), among other diagnoses that can significantly impact life expectancy. Family Medicine is associated with a decrease in all cause mortality across populations (11), a relationship that has not been found to be similarly applicable to access to specialist care. It is hypothesized that although much of severe disease is often referred to or cared for by specialists depending on your geographic locations, patients experience more monitoring of more aspects of their condition when cared for by family physicians than when cared for by a specialist (18). This means that if you are being seen for your heart disease, your primary care physician is more likely (at least by this study's findings) to also assess any other system involvement as it relates to or does not relate to your heart disease. Not only is this data representative of the quality of care provided by family physicians for disease treatment, it also speaks to the amount of prevention that is afforded by primary care.

It is clear that primary care reduces mortality (7). So, how significant is this impact on longevity? In other words, to what degree does this translate to more or at least healthier years of life gained? For every 10 additional primary care physicians per 100,000 people, there is an associated 51.5-day increase in life expectancy. (1) Restricted access to adequate medical care accounts for about 1 in 10 premature deaths (13).

This increase in longevity extends to *all* those with access to this care. Improving the way we provide primary care with PC4You is one of the many important ways of addressing systemic racism in the US and dismantling the structural inequities that healthcare continues to perpetuate. The life expectancy of white individuals still exceeds their black counterparts by 5 years as of 2020, and this gradient continues to increase as we see the ramifications of the COVID-19 pandemic exacerbating this issue (19). Increasing investment in primary care will distribute the benefits of increased longevity and improved overall health to populations historically marginalized in medicine which will begin to close the gap in life expectancy.

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