



Research in Family Medicine: from clinical practice to scientific evidence

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Dear readers:

Family Medicine, as a cornerstone of the health system oriented toward the care of the individual, the family, and the community, generates a wide range of information and experiences in its daily practice which, when systematically organized through research, lead to the creation of high-value scientific evidence.⁽¹⁾ This transition from practice to evidence not only strengthens the discipline but also drives the sustainability and relevance of new health policies, allowing Family Medicine to consolidate itself as a strategic field for equity and social justice in health.

Far removed from purely theoretical constructs, the daily consultation of the family physician can be understood as an observatory and laboratory, where appropriate implementation of the clinical-epidemiological method leads to the identification of risk factors and disease patterns that prompt the design and implementation of health promotion and prevention strategies. Indeed, the constant exchange and interaction between physician and patient constitutes a unique opportunity to generate research hypotheses, transforming clinical practice into a dynamic space for observation and analysis. In this setting, the systematic organization of data and experiences facilitates the transformation of routine care into applicable scientific knowledge.

Throughout this process, systematic observation is fundamental, enabling the detection of recurrent problems such as the management of various diseases, deficiencies in the health system, and the most appropriate strategies to effectively influence population health status. Added to this is the community context, which provides a holistic perspective by incorporating social, cultural, and environmental determinants, thereby enriching research by including variables that transcend the strictly biomedical realm. Furthermore, patient participation and lived experience become essential inputs for qualitative studies aimed at understanding illness perception and intervention effectiveness.⁽²⁾

However, transforming clinical experience into scientific evidence requires methodological rigor, as research in Family Medicine faces particular challenges. Research designs must be adapted to the reality of Primary Care, implying the use of mixed methodologies, community cohort studies, and trials that address concrete problems. Nevertheless, limitations in material resources and the execution of multiple programs in this setting minimize the time available to health personnel for conducting feasible and relevant research without compromising scientific quality.^(3,4)

Another fundamental challenge is research training. Although several elements of the scientific research process are addressed in educational curricula, the preparation of those involved remains insufficient when considering the quality of research conducted in this field and the scarce scientific output, which reflects poor research activity. It is therefore suggested to enhance related skills. Specifically, it is necessary to strengthen professionals' methodological competencies by promoting training in biostatistics, epidemiology, and scientific writing.⁽⁵⁾ It is also important to emphasize the ethical dimension, which demands ensuring active community participation, avoiding extractive approaches, and promoting co-responsibility in knowledge production. This requires balancing academic rigor with practical relevance to ensure that results respond to the real needs of patients and communities.

Thus, the impact of research in Family Medicine is directly reflected in the improvement of health systems; it enables the development of evidence-based clinical guidelines and protocols adapted to local realities, thereby enhancing the quality of care. Likewise, the generated evidence contributes to designing more effective public policies in health promotion and prevention. Similarly, family physicians who engage in research strengthen their role as community leaders and agents of change, while the publication of their work in scientific events and journals enhances the international visibility of the discipline and fosters global exchange of experiences.⁽⁶⁾

In turn, the internationalization of Family Medicine represents a strategic opportunity to consolidate its standing in the scientific arena. To achieve this, it is essential to promote collaborative networks among universities, scientific societies, and specialized journals, as well as to encourage open-access publishing to ensure greater visibility and democratization of knowledge. The translation and adaptation of findings into different languages and sociocultural contexts, along with the integration of digital tools for data collection, analysis, and dissemination, are strategies that allow research to transcend borders and become a global reference.

In conclusion, research in Family Medicine is the bridge connecting clinical practice with scientific evidence. However, it requires overcoming methodological challenges, consolidating collaborative networks, and strengthening the research training of professionals. Its future depends on the current capacity to transform everyday experience into validated knowledge capable of guiding policies and practices for the benefit of communities.

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