



Melissa Tan

Making a difference

It has been said that you can never know the extent of your influence.

More times than I can count, a single comment at the right moment has opened up new perspectives on problems that previously seemed insurmountable. More times than I have realised, witnessing the skillful handling of difficult situations has provided guidance for my own challenges.

When I was a hospital resident in an emergency department, a heavily armed police escort brought in a patient who was experiencing hallucinations that were absolutely horrifying for him. As he screamed and thrashed, heads peered out of nearby cubicles and staff appeared out of nowhere. A teenager walked out of his cubicle and stood staring. There was a sense of fear and adrenaline.

The doctor in charge took control, firmly announcing that this patient had a psychiatric illness, was clearly scared and didn't know where he was or why he was being held down. Addressing curious onlookers, she added that the patient would be treated with respect. With this, people receded back to their cubicles, their eyes downcast, and extra staff returned to their duties. As curtains were quickly drawn shut, some decency was restored to an undignified situation.

Patient situations like these are relatively common in health care settings. However, the impact of the actions of this individual doctor was tangible. Witnessing the brief and effective handling of this situation formed a new benchmark in standards of patient care for me.

As doctors, we hold a particular position and responsibility in the lives of people with mental illness. There will be times when we encounter opportunities to make a difference. Often these opportunities lie beyond diagnosis, treatment and referral. There will be times that call upon our advocacy to preserve dignity and humanity in the treatment of our patients. There will also be times when we are called to raise awareness

and challenge societal misperceptions of mental illness. At such times, we can be powerful advocates for people who cannot always speak for themselves.

As general practitioners, we are also in the unique position of providing an open door and ongoing care to individuals who have minimal contact with the wider health care system. This brings a new set of challenges and opportunities. The prescription of psychotropic medications is an important responsibility, when there can be a fine line between compliance, non-compliance, dependence, abuse and sadly, overdose. We also know that lack of continuity of care can be harmful. Effective follow-up systems can sometimes be the difference between a safe port and a ship lost at sea. In facing such challenges of primary care, we need to go beyond our individual clinical practice and build good systems to provide important safety nets for people with mental health problems.

People with mental illness and those who care deeply for them will go through difficult times. But there are opportunities for all involved to work together to make a difference. Sometimes when the blocks are stacked correctly, there are breakthroughs for patients, and when they arrive, they are so heartening to experience.

In this issue of *AFP*, we focus on psychiatry in general practice. I commend the authors for their excellent articles. Johnson and Blair-West¹ discuss the recognition and management of obsessive-compulsive disorder and highlight the importance of delving deeper to identify patients who may not disclose symptoms for fear of judgment. Mitchell² provides a timely and useful update of current approaches to the diagnosis and treatment of bipolar disorder. Lee and Jureidini³ provide an approach to emerging psychosis in adolescents, emphasising the importance of careful evaluation prior to diagnosis and cautioning against over-diagnosis of mental illness.

Also in this issue, Gordon and Melvin⁴ review the side effects of selective serotonin re-uptake inhibitors in adolescents, paying special attention to suicide risk within this population. Wade and colleagues⁵ outline an early approach to psychological trauma, providing practical approaches to assist patients who have been exposed to traumatic events.

I hope this issue of *AFP* offers you new insights and approaches in caring for people with mental illness, and perhaps serves as a timely reminder of the influence that your practices can have on those around you.

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References

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