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# A healthy educational diet

■ **January in Australia conjures up images of lazy summer days at the beach, long warm evenings, and crisp cool summer salads, made from a bit of this and a bit of that... the wonderful whole so much more than the sum of the individual parts. So we thought for our summer issue of *Australian Family Physician*, we would toss together some of our best ingredients... a bit of this and a bit of that... to create a crisp, healthy, educational salad for your consuming pleasure.**

A healthy diet needs to include nutrients from a variety of different food groups, and in our educational diet the domains of general practice can be seen as our essential nutrient groups:

- communication skills
- applied knowledge and skills
- population health
- professional and ethical roles, and
- organisational and legal dimensions.

Communication is the cornerstone of good general practice. In their article, 'Overcoming communication barriers', Chew and colleagues illustrate some of the challenges of communicating successfully with patients with intellectual disabilities. As well as discussing the range of formal augmentative and alternative communication strategies that can be utilised, they remind us of the basics of communicating with every patient: communicate directly to the patient, tailor language and communication style to the needs of the individual, be inclusive, check understanding, and ensure adequate time. The authors also illustrate to us the importance of other domains in communication. From the population health and context domain we need to consider the needs of special groups, our own health advocacy role and the influence of significant others on the patient and their understanding. Good practice organisation is also essential with appropriate appointment booking and providing an inclusive practice in organisation, physical environment and in practice culture.

The principles of critically appraising new evidence, adding it to our knowledge base, acknowledging the questions that still remain unanswered and applying that 'best available evidence' to the day to day care of our patients is exemplified in Yeap's article, 'Controversies in type 2 diabetes'. He discusses the controversy surrounding possible bone fracture and myocardial infarction risks of glitazone therapy, and the benefits and risks of different HbA1c targets, and distils this

information into a sensible, practical approach, appropriate for the realities of primary care practice.

In our 'summer salad' we have brought a research article to the front section of the journal, to illustrate the importance we place on original primary care research at *AFP*, and because of the pivotal role research plays in Australian general practice. While not all GPs will undertake research projects themselves, there are opportunities in day to day practice to assist in general practice research data collection, to question, to identify evidence gaps, to seek out the best available evidence for management of problems that present and to critically evaluate evidence in journal articles, websites, other educational publications and pharmaceutical marketing material. 'Breastfeeding knowledge', by Brodribb and colleagues, illustrates important components of research: a clearly articulated research question, appropriate methodology and good questionnaire design. It is a clearly written paper demonstrating registrars' perceive their training in breastfeeding in medical school, hospital years and vocational general practice training has not been adequate for their present needs, and that personal breastfeeding experience was the most valuable 'training'. As the authors state, personal experience of breastfeeding (or any health related issue for that matter) should not be a prerequisite for competent practice and that formal breastfeeding training is required, particularly during vocational general practice training.

Our final theme article for this issue, 'Compounded medicines and 'off label' prescribing', by Fois and colleagues, is our representative from the 'professional and ethical role' and 'organisational and legal dimensions' domains. The article reminds us that compounded medicines are exempted from parts of the *Therapeutic Goods Act* and discusses strategies for balancing the risks and benefits of these preparations.

January in Australia is also a time of New Year's resolutions. At *AFP* our resolution is to provide evidenced based, relevant, interesting, diverse, clearly articulated information to Australian GPs in all their roles as clinician, researcher, educator and practice team member to assist them in providing high quality patient care.

We wish all our readers a rewarding year professionally and personally in 2009, and hope you enjoy our summer salad and the healthy educational diet we will serve you in the year to come.

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