Mental Health Issues in Primary Care

Mental Health Issues in Primary Care: A Practical Guide

ELIZABETH ARMSTRONG

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Few people can fail to be surprised when they learn of the sheer enormity of the misery and costs experienced by the general population because of mental health problems, be they severe but rare illnesses such as schizophrenia, or the generally less severe but much more common depression and anxiety from which many if not all of us may suffer at some time in our lives. Surprised too, when they hear statistics such as the high proportion of people who commit suicide who have been to see their doctor in the week before their death. Mental illness can be treated and there is much that can be done to prevent suicides. The selection of mental illness as a key area in *The Health of the Nation* (1992) is helping to focus our attention on doing both.

Of all the health services, primary care is ideally placed to act. It has been known for more than a decade that over a third of all people consulting their general practitioner have psychological problems and that very few of these people are referred subsequently to psychiatric services. Mental health skills are, therefore, vital for all primary care professionals, as well as for specialists. However, much depression and anxiety still goes unnoticed in primary care, partly because it may masquerade as physical illness, and there is a clear need amongst primary care doctors and nurses for help in the detection and treatment of mental illness. Mrs Armstrong's book provides that help.

The book evolved from the Mental Health Facilitator Project, begun in co-operation with the Department of Health, and is a remarkable example of targeted research providing practical solutions within a short space of time. Although aimed at the nursing profession in primary care, it will be useful to a broader audience of doctors, other health professionals and managers who must all be involved in a co-ordinated approach to tackling mental illness in primary care settings. In addition to describing a wide range of mental health problems encountered in primary care and their diverse presentations, Mrs Armstrong discusses the treatments available and strategies for prevention.

Aiming to identify and treat effectively more mental health problems in primary care will not lead to extra work. The workload is already there, generated by the increased rates of consultations and referrals of people with an undiagnosed or poorly managed psychological disorder. On the contrary, better detection and management decreases that workload and has benefits for patients and professionals alike. This book will provide a resource for all those who wish to achieve these aims and I commend it as a major contribution to their efforts.

Dr Rachel Jenkins
Principal Medical Officer
Department of Health

When I began work on the Mental Health Facilitator Project in February 1991, it would have been difficult to foresee the enormous explosion of interest in mental health that there has been among nurses and doctors who work in primary care. Undoubtedly the inclusion of Mental Illness targets in the *Health of the Nation* strategy has been partly responsible, along with the Defeat Depression Campaign, jointly run by the Royal College of Psychiatrists and the Royal College of General Practitioners. Also contributing has been the increasing visibility of mentally ill homeless people on our streets – though in primary care terms this may be something of a red herring.

The difficulty remains that traditionally the focus of most health care in GP surgeries and clinics has been on physical illness. Typically, GPs eliminate the physical before considering the psychological. Practice nurses have taken their lead from this. The high profile given in the last 10 years to the prevention of heart disease and cancers has concentrated health promotion initiatives in these areas. There are indications that a substantial portion of this effort may be failing to meet the health care needs of a large number of those who consult GPs and nurses. Research has shown that as many as two-thirds or more of surgery attenders may be suffering from some level of psychiatric disorder. Much of this co-exists with physical illness, emphasising the interdependence of mind and body. Yet it is only the body which has received attention!

Health professionals are increasingly aware of the limitations of the traditional approach. They are also searching for practical ways to address their clients' psychosocial as well as physical health needs. The large number of requests that I receive asking for help in this area is testimony not only to the level of interest but also to the scarcity of reliable advice and information.

This book is designed to meet some of the needs. It is not a psychiatric textbook. Rather it is designed to help primary health care team members cope with some of the common mental health problems they

meet every day. Inevitably there will be gaps – for which I apologise. This is a huge subject and we have to start somewhere.

The book is intended primarily for nurses – for practice nurses and other community nurses, for primary care facilitators and FHSA nurse advisers. There is much here for GPs too, and I hope it may be of use to health promotion officers and to FHSA managers. The vast majority of people with psychiatric illness are cared for in primary care. Most primary care professionals do not have specialist mental health qualifications but that they need mental health knowledge and skills is undeniable. By pointing to this need, and highlighting the gaps, this book may also serve to help purchasers and commissioning agencies make rational decisions about spending NHS money.

Above all, I hope this book is practical. I have tried throughout to draw attention to sources of helpful material: to books, literature and audiotapes for patients, educational programmes for professionals as well as organisations offering information and support in mental health related fields. Where full details are not given in the text, the Resources section at the end of the book will supply addresses.

To all those who have helped me tackle these issues over the past three years, whether or not your name is listed below, I should like to offer my thanks. In particular to the GPs, nurses, practice managers and staff of six practices in inner London. Thankyou for being my guinea pigs. Without you, none of this would have been possible.

EA
February 1994

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