

# Wherever medicine is loved, there is also a love of humanity

Rim Ghali

**SINCE THE COVID-19 PANDEMIC**, we have seen a rise in the prevalence of psychological presentations in primary care. The impact of poor mental health on physical health and function is profound, and arguably this is the time for greater knowledge, support and empowerment for general practitioners (GPs) and patients.<sup>1</sup>

Patient mental health presentations are frequently complex and deeply rooted.<sup>2</sup> Undeterred by the magnitude and chronicity of the condition, GPs provide holistic psychological care in a personalised way, building on the trust intrinsic to our working relationship with patients.<sup>3</sup> Reflecting on how we practise with empathy and commitment, we see the selfless humanity in this work.

Sadly, the task of navigating a fragmented mental healthcare system in a time of economic hardship adds to GP strain. For Australians to access quality psychological care, we must invest in ourselves – not just in our knowledge but in our own mental and physical health.<sup>3</sup> As you read this issue, we encourage reflection, not just on improving the patient's psychological wellbeing but also on prioritising your own self-care: go for that walk, take that nap, catch up with that friend, find time for that hobby. Truly, by investing in ourselves, we can better serve our communities in the long run.

We are pleased to present this issue on psychological medicine to you, our readers, which includes a range of topical content that is interesting, inspiring and evidence based. Looi et al provide an update on the

deprescribing of antidepressants in moderate-to-severe depression, summarising that we can be more confident of the potential benefit of long-term pharmacotherapy in these patients.<sup>4</sup> Gündeş et al describe the impact of health anxiety on the somatosensory experience of adolescents presenting with chest pain, an often-overlooked population.<sup>5</sup>

With the rising use of medicinal cannabis and growing evidence base, a description of the barriers and enablers to its use in primary care by Martin et al is timely information.<sup>6</sup> This issue also includes a case description of an elderly patient with corticosteroid-induced psychosis, an important consideration for those on long-term immunosuppressive therapy and in the context of polypharmacy.<sup>7</sup> Dobbin describes the SafeScript real-time prescription monitoring system used to address the risks of high-risk and schedule 8 medications.<sup>8</sup> The article discusses some of the potential impacts this system has had on patient use of these medications and on practitioner access.

Finally, Singleton et al provide an experienced perspective on the diagnosis and management of borderline personality disorder in general practice, with a timely reminder of prioritising self-care with a view to avoid clinician burnout.<sup>9</sup> We hope you enjoy reading this issue as much as we have enjoyed curating it.

*Wherever the art of medicine is loved,  
there is also a love of humanity.*

– Hippocrates<sup>10</sup>

## Author

Rim Ghali MBBS, BMedSci, CWH, Postgrad Dip Surg Anatomy, Editorial Fellow Academic Post, *Australian Journal of General Practice*; Academic Registrar, The University of Melbourne, Melbourne, Vic

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