Psychological Medicine

MONOGRAPH SUPPLEMENT 9

Minor psychiatric morbidity and general practice consultations: the West London Survey P. Williams, A. Tarnopolsky, D. Hand and M. Shepherd

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Minor psychiatric morbidity and general practice consultation

It is now well-established that the bulk of the psychiatric morbidity that exists in the community is managed not by psychiatrists, but in primary medical care settings. This observation emphasizes the importance of studying the relationship between psychiatric morbidity and general practitioner consultation, and factors which influence this relationship.

This is the topic of the present monograph. The literature review brings together work from three research traditions – empirical psychiatric epidemiology, the social structural perspective, and social psychology – which has focused on the influence of psychiatric morbidity on health service use (with special reference to its influence on consultations with general practitioners).

The study demonstrates that the presence of minor psychiatric morbidity doubles the probability of consulting, and that about one-fifth of consultations could be attributed to it. The influence was also studied of a variety of predisposing and health-related factors on the relationship between minor psychiatric morbidity and general practitioner consultations. As expected, the healthrelated factors exerted much more influence on consulting than did the predisposing (sociodemographic) factors: however, there were complex interactions between them. In particular, sex, socioeconomic status and minor psychiatric morbidity interacted in their influence on general practice consultations.

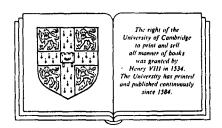
This monograph also provides an illustration of the usefulness and potential of secondary analysis of survey data.

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