

Novel and integrative treatments in primary care for patients with MUS

Innovating health care in Cyprus

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Currently, patients with MUS (also called somatisation disorder or “functional symptom/distress disorder” in newer classification systems) have unmet health needs as a result of diagnostic uncertainty, a paucity of evidence-based treatments and because it is difficult to engage these patients in holistic care. Consequently, these disorders result in high-cost pressures to the health economy.

The feasibility and cost/clinical effectiveness of a novel, innovative care pathway was recently evaluated in an open trial for patients receiving primary health care in a “one-stop-shop” fashion in GP surgeries in London/UK. The care pathway includes the following steps: Identification, Assessment, Engagement and Group Interventions – Mindfulness-based Stress Reduction (MBSR) and Body Oriented Strategies for Better Living (SBLG). Both interventions were entirely focused towards helping patients to improve their overall coping and to foster wellbeing, without challenging the patient’s health beliefs or explicitly working psychologically (www.healthfoundation.eu). The findings of the project analysis demonstrate that patients who participated in the project (N=93 out of 145 referred) gained significant improvements in somatic symptom levels (main outcome measure PHQ-15); this resulted in a corresponding significant reduction in health care utilisation (primary care consultations and referrals to specialist services) and self-reported increases in health-related quality of life (SF-36, EQ5). The analysis of qualitative data suggested that patients who participated in the intervention had additional health benefits in terms of a more inclusive understanding of their health condition and improved self-management control and coping skills (Röhricht *et al*, publication in preparation).

The Medical School at the University of Nicosia in collaboration with the University of Essex/UK and East London NHS Foundation Trust is now planning to carry out a pilot trial in Cyprus with a view to evaluating whether the main body oriented intervention of the care pathway can be successfully utilised in primary care in Cyprus.

At a time when the Cyprus health care system is undergoing significant changes with the introduction of a National Health System this trial is aiming to contribute towards the notion of strengthening treatments at primary care level, raising the profile of the General Practitioner. The NHS Cyprus will be organised along integrated networks of family health units to manage the overall health care needs of the people and be based on the Family Doctor (FD) concept. The FD will be the first point of access to the system and will act as the gatekeeper.

Previous research has indicated that the most prevalent disorders in Cyprus are those related to somatic dysfunctions and substance abuse (alongside anxiety and depression; Panayides, 2001). Mental health is however still stigmatized and “Greeks prefer discussing personal mental health issues with medical personnel rather than psychologists or social workers” (Zissi, 2006). This poses challenges given that anxiety and depression “...has increased substantially among young Greeks in the last three decades” (Georgiades, 2009).

The trial will therefore not only contribute to the evidence base but will also enhance the knowledge and skills of family doctors and explore integrative methods of care delivery.