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WORK-RELATED MENTAL HEALTH CONDITIONS: ADVICE FOR GPs

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NEW Australian clinical practice guideline recommendations to assist GPs with the diagnosis and management of work-related mental health conditions (MHCs) have been released, and are summarised in the *Medical Journal of Australia*.

Professor Danielle Mazza, Head of the Department of General Practice at Monash University and colleagues developed 11 evidence-based recommendations and 19 consensus-based statements which aim to assist GPs with:

- the assessment of symptoms and diagnosis of a work-related MHC;
- the early identification of an MHC that develops as a comorbid or secondary condition after an initial workplace injury;
- · determining if an MHC has arisen as a result of work factors;
- managing a work-related MHC to improve personal recovery or return to work;
- determining if a patient can work in some capacity;
- communicating with the patient's workplace; and
- managing a work-related MHC that is not improving as anticipated.

"The guideline focuses on MHCs that may have arisen as a result of work, such as depression, anxiety, post-traumatic stress disorder, acute stress disorder, adjustment disorder and substance use disorder, and builds upon key principles articulated in the Health Benefits of Good Work consensus statement, and the Fifth National Mental Health and Suicide Prevention Plan, which emphasises that 'consumers and carers have vital contributions to make and should be partners in planning and decision-making'," wrote Mazza and colleagues.

"Underlying the clinical recommendations are also two key principles: that GPs provide care within their expertise, knowledge and capabilities, and that GPs ensure that culturally and linguistically diverse patients and young people receive appropriate care throughout their recovery."

The authors wrote that although they had endeavoured to provide evidence-based advice to address all clinical questions, "for some questions no reliable evidence could be identified".

In addition to the recommendations for future research, the guideline development group noted gaps in the evidence on the following areas:

- management strategies for work-related MHCs that are feasible and acceptable for GPs to utilise, including special considerations for GPs practising in rural and remote Australia;
- evidence to describe the value of work participation for people with a work-related MHC; and
- feasible tools and strategies that are validated for use in the general practice setting to support the diagnosis and management of acute stress disorder and adjustment disorder.

Please remember to credit The MJA.

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