Author's response to reviews

Title: General Practitioners' opinions on their practice in mental health and on their collaboration with mental health professionals.

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Response to the reviewer

We would like to thank the reviewer for the review and remarks which have enabled us to clarify our viewpoint and define the orientations of the article. We did not in any way intend to stigmatise persons with mental disorders managed in primary care. On the contrary, we wanted to offer a pragmatic approach to help all the professionals concerned by mental health (Psychiatrists, GPs) to review their positions and to work towards more collaboration. We assume (because of our experience of collaboration in the mental health network developed in the area since the survey) that other patterns of collaboration between primary and specialist care could improve working conditions for all concerned, and provide better care for the commoner mental health problems. This care, mainly delivered by GPs, is now supported by the specialist mental health network outside classic referral patterns.

We have revised the whole article and have made several modifications (in blue). They aim to give more positive views on mental health care in primary care, and to suggest pragmatic collaborative actions in connection with recent literature. We did not mention such publications in the first version to avoid anticipating on conclusions reached after this survey and after an another survey addressed to all the professionals concerned by mental health in the area (article to be submitted). The relevant literature is presented in the second version of the article as suggested by the reviewer.

- First, we have positioned the study within the context of collaboration between primary care and mental health care essential to health care systems. We have mentioned recent instances of collaboration in Australia, UK, US and Canada. We have retained the reference to the Australian work, even if a little out of date (1995), because it was, like ours, a survey of GPs' opinions (and there are few in the literature). Its interest lies in the parallel with ours, but we agree to delete it if the reviewer thinks appropriate to do so.
- Second, in the discussion, we have specified that our study was based on GPs reports on persons that they identified as having mental health problems. It is not a direct assessment of GPs' patients, objectively measuring the needs for mental health care among them (as has been done in Australia or in UK, studies we have mentioned). We have outlined the difference between the two modes of recruitment, noting that this entails a potential selection bias in our survey (of more severe patients). We have stated why we chose this mode of recruitment : to explore GPs' opinions so as to suit the design of the new local mental health project in which GPs will be central.

- In the second part of the discussion we have deleted negative terms stigmatising patients with mental disorders managed in primary care, presenting primarily GPs' opinions and their key role in this type of care delivery.
- In the third part of the discussion we have put emphasis on collaboration, distinguishing between "classic" patterns of referral to psychiatrists for follow-up and other forms of collaboration. According to our results, GPs do not see systematic referral as a major therapeutic option (seen as the option by GPs for only a third of patients where needs of collaboration were not met). They would mainly prefer other forms of collaboration, without knowing what they might be. The task of the new mental health project is to organise this collaboration (and it has in fact been done by organizing along the lines of the "individualized stepped care" proposed by Von Korff and Tiemens, 2000). In the article we have remarked how such collaboration could improve GPs' satisfaction with their relationships with mental health services, on the basis one result
of the survey: opinions are more positive when actual collaboration exists.
- The new conclusion returns to these results.

We hope that we have answered the remarks. On your last question on the choice of BMC journal, we would prefer to publish this article in BMC-Public Health (rather than BMC-Family practice) because our second article will compare GPs' opinions with those of private and public psychiatrists in the area, in the light of global mental health care organization. Thus it seems to us that the main field of interest is that of public health.

Our thanks for your attention, and we look forward to your answer.

Yours sincerely

Nadia Younes