



Yonder: a diverse selection of primary care relevant research stories from beyond the mainstream biomedical literature

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Adolescent asthma, termination of pregnancy, oncologists, and doctors' attire

Adolescent asthma. Internet fora represent views of people communicating freely with one another without time, length, or geographical constraints. A team of London-based researchers recently explored the experiences of adolescents with asthma inhaler treatment by analysing existing posts in an online forum (Asthma UK) written by adolescents and parents.¹ They identified a number of practical barriers to inhaler use including forgetfulness, poor routines, inadequate inhaler technique, organisational difficulties (such as repeat prescriptions), and families not understanding or accepting that their child had asthma. Facilitators to adherence included actively seeking GPs' or consultants' adjustments if problems arose and learning to deal with the side effects and stigma. Parents were instrumental in creating a sense of responsibility for adherence.

The authors suggest GPs should spend time in consultations exploring parents' beliefs about asthma diagnosis and discussing their role in dealing with barriers to treatment.

Termination of pregnancy. Medical termination of pregnancy (MTO) is a safe and effective treatment to end pregnancy. New legislation in Australia means doctors working in general practice can now prescribe MTO drugs to end a pregnancy, up to and including 13 weeks. However, uptake has been low and a research team from Sydney sought to understand why.² They interviewed 32 GPs (8 MTO providers, 24 non-MTO providers) and found that some GPs had religious or moral objections, whereas others regarded MTO provision as complicated and difficult. Some GPs expressed interest in MTO provision but were concerned about stigma. GPs experienced difficulties in referring to a local public hospital when complications arose or for the provision of surgical abortion.

The authors suggest that formalised referral pathways to hospitals are needed, as well as leadership and coordination across the health sector to facilitate integrated abortion care.

Oncology. Specialists and GPs need to work together to achieve integrated and comprehensive cancer care by collaborating to coordinate diagnosis, treatments, side effect management, shared follow-up, survivorship care, and end-of-life care. Mutual understanding of each other's roles is essential to achieve this. This was the basis for a German study that assessed oncologists' views on the importance of GPs for patients with cancer.³ In their 15 telephone interviews with oncologists, GPs were described as 'persons of trust' with predominantly caring roles. This was in contrast to their own roles, which were thought to be in a 'biomedical sphere' and relate to evidence-based treatment decisions. It is currently patients, the authors state, that are being left to connect between these spheres. In the NHS, meanwhile, closer working between specialists and GPs has been a policy target for some time, although it remains only an ambition for large parts of the UK.

Doctors' attire. Although doctors bade farewell to white coats only a decade ago, the dress code of the profession has been a topic of discussion since the time of Hippocrates. There has been much research demonstrating that the public want doctors to dress in professional clothing and can be put off by informal wear. However, there has been little focus on the extent to which doctors' attire influences medical students' ability to identify specialties and level of training, as well as their career choices. A London psychiatry research team surveyed 100 fourth-year medical students and found that specialties with uniforms, such as anaesthetics and ITU, were the most recognisable.⁴ The students were rarely able to distinguish between consultants and junior doctors, and the majority thought that suits were worn only by surgeons. Tackling these stereotypes early on in medical training, the authors suggest, might be important to help recruitment to unpopular specialties. Thankfully, nobody has yet suggested that GPs ditch their corduroy trousers and let's hope it stays that way.

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