



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

### REFERENCES

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3. Mansourzadeh AR, Najafi Mehri S, Sirati Nir M, Zendehelel K. Living with malignant wound in cancer patients and adolescents with non-cancer diagnosis: a meta-synthesis of qualitative studies. *Int J Pediatrics* 2016; **4**(9): 3431–3440.
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### European GP workforce, asthma, malignant wounds, and breast implants

**European GP workforce** There are various models of primary health care around Europe and GP roles within these systems vary widely. In Germany, primary care doctor training is similar to that in the UK, with a substantial period of postgraduate medical training after qualification, followed by specialist training assessments before independent practice. The German system also matches the NHS when it comes to workforce shortages, with growing concerns about the shortage of primary care doctors. These workforce problems prompted researchers from Leipzig Medical School to investigate medical career choices by analysing a survey that was completed by 659 German medical graduates.<sup>1</sup> They found, rather unsurprisingly, that working conditions and the negative external presentation of general practice as a specialty were key deterrents. Although many of the important factors they found were personal considerations and not easy to influence, the authors argue that medical schools and other stakeholders should nevertheless be more energetic in their promotion of general practice.

**Asthma.** In Australia, much like in other parts of the world, primary care management of asthma remains suboptimal. As pharmacists are often the only clinicians that regularly review patients with asthma, they were the target of a recent medication guideline and associated Asthma Action Plan card in Perth. In order to evaluate these interventions, a research team conducted seven focus groups with an assortment of pharmacists, pharmacy assistants, GPs, practice nurses, asthma educators, and patients with asthma.<sup>2</sup> They found that, although pharmacists recognised and understood the guidelines and cards, it was pharmacy assistants who were operationally most involved in the sale of inhalers and yet they were generally unaware of these developments. The authors suggest that greater attention needs to be paid to the implementation of resources and that the focus of future interventions should be on improving health professionals' communication to facilitate patient behaviour change.

**Malignant wounds.** Community nurses spend a significant proportion of their time changing dressings for malignant wounds that are often painful, unsightly, and odorous. Clearly, these wounds can have devastating physical and psychological effects for patients who are typically having to simultaneously deal with a host of other disease and treatment effects. In order to gain a better understanding of the care needs of these patients, a research team from Iran recently completed a systematic review of qualitative studies on this topic.<sup>3</sup> Their review included eight studies in total. Findings from these studies were synthesised to form three overarching themes: distortion of lived body, symptomatic suffering, and compatible living with wound. Their paper includes some harrowing quotes and it is difficult to argue with their call for improved multidisciplinary palliative care services for this patient group.

**Breast implants.** Breast augmentation is one of the commonest cosmetic operations performed in the world and often sparks controversy and debate in both the medical and lay press. Some of these discussions have focused on the links with mental health, and this was the subject of a recent review led by researchers from the US.<sup>4</sup> Using national mortality statistics they examined seven primary studies, all of which found higher suicide rates among women with implants, whether compared with women of similar ages and races who underwent other plastic surgery; compared with women of the same age from the same countries; in women who are postmenopausal with implants compared with those without implants; or in patients who have had a mastectomy with implants, compared with patients who have had a mastectomy without implants. Although these observational data do not allow inferences to be made about causality, the authors call for further research in this area and, in the meantime, reliable mental health screening prior to cosmetic breast surgery and an end to advertising claims that breast implant surgery may be a reasonable solution to low self-esteem or depression.

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DOI: 10.3399/bjgp16X688177