



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

### REFERENCES

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2. Travis E, Juarez-Paz AV. Experiences of Tourette syndrome caregivers with supportive communication. *Qual Health Res* 2020; DOI: 10.1177/1049732320915444.
3. Emmott EH, Page AE, Myers S. Typologies of postnatal support and breastfeeding at two months in the UK. *Soc Sci Med* 2020; **246**: 112791.
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### Exercise procrastination, Tourette syndrome, breastfeeding, television deaths, and podcast of the month

**Exercise procrastination.** The COVID-19 lockdown seems to have had a remarkable impact on UK citizens' exercise habits, with various reports suggesting surges in physical activity levels during the height of the restrictions. Will these trends continue, though, as measures are lifted and life starts to go back to normal? A recent health psychology study examined procrastination in the context of physical activity.<sup>1</sup> It showed that exercise procrastination is associated with lower overall physical activity, even after controlling for intentions and general procrastination. The authors draw on research that has developed interventions to reduce 'bedtime procrastination' and suggest a similar approach could be used for exercise interventions. Setting realistic goals and choosing more enjoyable forms of exercise seems to be the main message for now.

**Tourette syndrome.** Tourette syndrome (TS) is a childhood-onset neurological disorder, which is marked by involuntary verbal and motor tics. Caring for a child with any chronic illness can be demanding for parents, but the caregivers of children with TS face particular challenges associated with the disorder's complexity, comorbidities, symptoms, and stigma. A recent US study of TS caregivers found that although they received supportive communication from family, friends, and medical professionals, they also experienced communication that might have meant to be supportive but instead created distress.<sup>2</sup> The authors suggest that the types of messages caregivers need may depend on where they are in their 'struggle'. For example, caregivers facing a new diagnosis may need big picture messages of support and encouragement, whereas those well versed and experienced caring for a child with TS may be more interested in answers and expressions of respect from medical professionals.

**Breastfeeding.** Many public health interventions aiming to improve breastfeeding rates have primarily targeted informational support to mothers, reflecting

approaches that are much more to do with individual behaviour-change than social and support networks. A London-based research team recently analysed online survey data to identify three 'clusters' of postnatal support.<sup>3</sup> 'Extensive support' mothers were supported by family, friends, and professionals. 'Family support' mothers were mainly supported by family; less so by professionals. 'Low support' mothers, meanwhile, reported lower support across all potential supporters. The authors reflect on the complexities of family support and its potential impact on breastfeeding, as well as the significance of professional support. They conclude that it may be beneficial for health professionals to engage with wider family in order to achieve extensive support for mothers.

**Television deaths.** My aunt, who was relatively young and generally healthy, died of COVID-19 pneumonia in April 2020, alone on a ventilator in an ICU bed. Her family, like most of the non-medical public, had only ever experienced ICU through medical dramas on television. A recent Canadian study examined how death following treatment withdrawal as depicted in a US medical drama (*Grey's Anatomy*) differs from realities observed during 6 months of fieldwork in an ICU.<sup>4</sup> It found that discrepancies between media representations and experiences in the ICU, especially around the frames of timing of death and the physicality of the unbound body (incontinence and agonal breathing). The authors suggest that the bereaved may be left viewing ventilator withdrawal and dying as chaotic processes and believing their loved one suffered through a bad death. Understanding these normative and discrepant frames, they conclude, should help healthcare professionals better prepare the public to witness death.

**Podcast of the month.** Neal Tucker is doing a terrific job of collecting and appraising primary care research (COVID-19 and otherwise) in the *NB Hot Topics* podcast: <https://www.nbmedical.com/NBPodcasts>

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