

Frustrated. Exhausted. Burnt out. These are just some of the things our colleagues in primary care are feeling.

I'm a GP registrar in the final 6 months of my training. It's taken me 15 years to get to this stage after starting my medical education in 2006. It's taken commitment, numerous exams, and countless sacrifices; but it has always been worth it knowing I was making a difference to my patients' lives and the satisfaction their hard-earned respect and gratitude gleaned. But all that has changed. The recent vitriol aimed at primary care from mainstream and social media is demoralising, soul destroying, and incredibly damaging.

Contrary to popular belief, we are and always have been open. Prior to entering GP training, I worked in secondary care as a medical and emergency medicine registrar. Like most of my hospital colleagues, I had little understanding of what actually happened in the mystical land of general practice. I do now. Having been the most senior doctor covering medical wards and emergency departments out of hours in busy inner-city hospitals, I can firmly say I have never been busier. The pressures are different, but the impact is real and it's palpable. To keep our patients and staff safe, we did what the government advised and moved the bulk of our work to remote consultations. However, if a patient's history necessitates a face-to-face appointment, my practice has always accommodated that. Recently I saw a 60-year-old man with glioblastoma and told him that sadly his disease was progressing and he was now dying. His crying wife was also there, listening, as I described how I would support them as his illness took its natural course. I also met a 56-year-old man with new reflux symptoms and weight loss, a woman with decompensated liver disease, two patients with abdominal pain, one with rectal bleeding, and multiple patients with various constellations of symptoms of varying complexity that have undoubtedly been exacerbated by the toll of the pandemic. I also spoke to many patients on the phone, carried out a house visit to a woman with

end-stage myeloma, and signed endless prescriptions. All before lunch (which I had at my desk). My colleagues up and down the country are having days just like this, trying their best, while the media paint us as lazy, money-grabbing, work-shy villains. The pre-pandemic hero claps have been replaced by insults and slaps.

THE GP CRISIS

Of course, general practice was in crisis long before the pandemic. GPs routinely reported working over their contracted hours and the shortage of over 2500 full-time equivalent GP roles is on course to rise to 7000 unfilled roles by 2023. GPs are responsible for 90% of patient consultations in the NHS yet allocated less than 10% of NHS budgets. The shortage has placed great strain on the profession. GPs are overworked, overburdened, and overstretched. COVID-19 has only exacerbated these issues. The number and complexity of cases have increased because of a combination of the postponement of non-essential care and later presentations due to patient anxieties around accessing health care during a pandemic. GPs have adapted to the new way of working. Telephone triage has been adopted across the board and this has largely been both effective and efficient. However, the increased demand has strained the profession.

We carried out an informal survey of 244 GPs via GP groups on social media, to investigate the impact of COVID-19. In total, 87% of responders felt that the pandemic had impacted 'negatively' on their role.

SOCIAL MEDIA AND DAMAGED MORALE

Social media has reflected the frustrations of a growing number of patients who have perceived locked doors as practices being closed for business. This could not be further from the reality, as 92% of responders felt that their already heavy workload had increased as a result of the pandemic as GPs shoulder the burden of cancelled hospital appointments. The toxic environment is ubiquitous on social media and 97% had seen negative comments from the public while

88% had encountered abuse from their own patients in the past 6 months. All responders, bar one, had seen negative press including headlines such as 'GPs are hiding', 'GPs are skimming money off the NHS to sit and do nothing', and 'remote consultations are killing people'. Anti-GP memes further the idea that GPs are 'lazy', 'cowards', and 'have been hiding'. Disappointingly, 86% of responders have seen negative comments from other health professionals. An overwhelming 99% reported that negative press had a negative impact on morale. Without support from colleagues and governing bodies, GPs feel that attempting to counter the narrative is futile. GPs are 'exhausted'; the ideas of critics are 'very deep rooted' and replying would only 'invite further abuse'. As a result, GPs feel 'close to burnout' and 'dreading going back to work'. This has created a precarious situation. In the face of a GP crisis, we found only 19% are satisfied with their job and only 35% would recommend general practice to future applicants. Unless things change for the better, this gap will only continue to grow.

SOLUTIONS AND THE FUTURE

How do we improve the situation and boost morale? Sixty-nine per cent felt that a media campaign is needed. It was suggested that the BMA and RCGP have not been vocal enough in standing up for GPs. A concerted push by these trusted bodies to correct the narrative would be considered very welcome. Additionally, 93% felt that placements in general practice should be compulsory for trainees in other specialties. This would promote interdisciplinary understanding of the pressures facing primary care. The pandemic has pushed primary care closer to critical point. If we don't support those working in primary care, a mass exodus of GPs for pastures new is looking likely and the NHS as we know it will no longer exist.

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