# Depression? There is hope! A funded half-day (3 hour) course on Depression for GPs

# enquires: courses@joineduphealth.net

# Introduction

Depression - whether overt or as part of a range of co-mobidity - represents a large part of GPs workload (most GPs estimate this to be a factor in up to 30% of consultations) and most depression is managed in Primary Care. Yet depression receives little attention in postgraduate education for GPs and what is provided is frequently delivered by specialists, and/or focuses on medication. This course introduces ideas and practical tools that many GPs in recent years have found an invaluable addition to their resources in this area. In addition to providing an opportunity to fill gaps in our knowledge, this course provides a detailed but practical model within which GPs can integrate their pre-existing skills and knowledge. Importantly it also helps GPs understand more fully how other interventions relate to one another. Overall it is intended to complement existing skills and create confidence in the non-pharmacological approaches to depression, which are often valued by patients. Feedback from attendees has been very positive. Feedback from the first course can be provided in a separate pdf. A copy of the original flyer developed with BGPERT can also be provided.

# Learning Outcomes: "By the end of this activity participant will ..."

- Have learned how to engage with depressed patients without "catching" their low mood and anxiety.
- Have more ways, within the GP consultation timeframe, of making a difference for the many patients who aren't simply seeking a prescription.
- Have learned how new ideas in neuroscience can inform our work with patients with depression (and many other linked disorders)
- Have a clear understanding of how inflammation as a cause of depression actually ties together much of what we already knew.
- Have gained language and other skills to make consultations with depressed patients more productive, and (we dare say) enjoyable.

# Structure (can be adapted)

Three sessions of roughly 55 minutes each: First session

covers current approaches and models for managing Depression in primary care, and introduces the basic organising ideas of Innate Needs, Innate Resources and Environment. Special emphasis is placed on the integrated relationship between neocortical and emotional aspects of brain function.

The second session

covers two related "cycles" of depression – the first relating to rumination, emotional arousal and sleep disturbance, the second, linked cycle, relating to chronic stress responses, inflammation and sickness behaviour. Lastly the key elements in disrupting these cycles are identified.

The third session

describes on practical tools derived from GPs' actual practice on how to manage and respond to depressed patients.

#### Who is it for?

This specific course has been designed for General Practitioners and assumes attendees are seeing patients for typical GP consultation times. It also relies on an ability to absorb a reasonably large number of ideas and technical information in a short time-frame! The seminar is intended to be interactive and numbers above 30 attendees on the day will tend to reduce interactivity.

# Venue requirements

A room with flexible/portable seating, and space for attendees to move around is best. Tea and coffee will need to be provided prior to the course beginning and be available for at least the first, if not both breaks.

### Online Live Version

This seminar can be delivered via Zoom. Please note that because Zoom has proven to be a slower medium for interactive and discussion elements than live events, the course content will be slightly simplified to avoid, with less emphasis given to underlying theory.

#### Speaker.

Dr Andrew Morrice, BSc MBBS MD MRCGP DipHGP General Practitioner and Human Givens Therapist.

Relevant experience:

21 years General Practice experience, 19 years partnership with responsibility for a personal list in a large teaching practice. Taught on the Whole Person Care course at University of Bristol Medical School as a small group facilitator and lecturer from 2002 to 2017. Attended Human Givens training days on Depression in 2003, and applied this information to all consultations for depression since that date: and subsequently completed HG Diploma in 2012. Now a registered Human Givens therapist and non-principal GP.

# **Course Development**

Devised in collaboration with 4 GP colleagues: Drs Melanie Macintosh, Adam Lake, Susan Beckers and Maarit Brook.

# Costs

Charitable funding for speakers' fee, room hire, and light refreshments have been made available by the Human Givens Foundation.

The suggested arrangement is that the organisation and publicity for the event are handled by a GP education organisation. As most GP education organisations charge an annual fee, to date, this organisational work has been undertaken on behalf of each organisations GP members, making the event free to attend, (with a small charge for non-members) and also free of pharmaceutical representatives, which many GPs value.

Funding/reimbursement is being administered through Human Givens College.

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# <u>Any further questions</u> and to organise a course for your members:

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# Background

The Human Givens approach was devised in the late 1990s by synthesising techniques from a wide variety of talking therapy disciplines, including CBT, with insights from neuroscience and a set of organising ideas about human wellbeing. Although the approach has yet to receive the degree of research attention it deserves, the current evidence base shows it is effective and highly acceptable to patients. Numerous GPs have attended HG training days, and many, including myself, have completed the full diploma training. This training, and the regulation of HG therapists, are recognised by the Professional Standards Authority.

The specific impetus behind this seminar was a charitable donation from a family bereaved of a daughter through suicide. Their wish is to raise the profile of a broader approach to depression.

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