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### **A group of general practitioners in charge of persons in mental health institutions: limits of the work and ethical reflexions**

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**Background and Aim:** Since 1981 a first GP was affected to a large neuro-psychiatric institution, which at that time was in charge of some 950 patients. Only 4 psychiatrists were working part-time for these patients and many people were hospitalized over months, even years. At present time, 23 psychiatrists and 5 GPs are in charge of a population decreased to some 420 residents.

**Method:** We as GPs are totally responsible for the somatic diseases and the population, which is separated in: 240 patients in the psychiatric rehabilitation hospital, 80 people with learning disabilities in sheltered houses, 45 patients in rehabilitation wards for addiction and some 50 psychiatric patients in living communities. The aim of our study was to analyse the different somatic pathologies we treated over the last year, knowing that for some life-threatening pathologies: cancer, advanced stage of liver cirrhosis etc. the treatment options were not always accepted by the patients.

**Results:** We classified the chronic diagnosis into several main categories: 27% hypertension; 22% overweight: often side-effects of psychiatric medications; 12% diabetes; 9% coronary insufficiency; 7% hepatic cirrhosis and 5% cancer. Our daily work consists of nutritional and physical activity advices (in collaboration with nutritionists and sport coaches) and in the regular supervision of the encountered diseases, as long as people are in our institutions.

**Conclusions:** Major limitations of our work is the fact, that we are not allowed to continue to follow these people if they are discharged from our wards and regularly they are addressed to outside GPs, but often lack to visit them. Several rehospitalizations occur during a year and for many reasons, the somatic diseases are not followed-up regularly: financial problems, precarious living situations or low insight due to the mental problem.