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# General Practice

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This monthly current awareness bulletin aims to highlight relevant reports and peer-reviewed literature in General Practice. The bulletin keeps up with the latest news on all the issues facing GP practices, including clinical care, finance, workload and workforce issues.

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## References

**Aljohani M., et al. (2025) ['Changing Patterns of General Practice Services during a Period of Public Sector Investment in Britain.'](#) *PLoS ONE* 20(1) (pagination), Article Number: e0313168. Date: 01 Jan 2025.**

**Introduction** Given the importance of GP care to the public's health, it is important that we understand how patterns of service use change as levels of investment change. This study investigated GP use in Britain in conjunction with use of outpatient services during a period of investment and during a period of austerity. **Method** The study used data from the British Household Panel Survey (BHPS) that included service use, morbidity (as an indicator of need) and socio-demographic characteristics (e.g., employment, age, education, and sex). Data for 2000, 2004, and 2008, were specifically chosen for comparison with data from 2015, 2016 and 2017. **Conclusion:** The results are broadly indicative of stable relationships in service use during a period of healthcare investment but change during austerity. Those who

reported, vision, hearing, and skin conditions were consistently less likely to report use of GP or outpatient services, controlling for other aspects of health.

**Als J.G., et al. (2025) ["You would rather Not Fill Your Body with Pills'-Patient Perspectives on Polypharmacy and Medication Reviews by Pharmacists in General Practice."](#) *Scandinavian Journal of Primary Health Care* , 1–11.**

INTRODUCTION: Polypharmacy is widespread. The demographic shift toward older patients receiving multiple medications increases risk and drug-related problems in these patients.

**Ann Spencer R., et al. (2025) ["Promoting Health Literacy of Older Post-Discharge Patients in General Practice - Creation of the GP-MATE Communication Tool through Co-Design."](#) *Patient Education and Counseling* 130(pagination), Article Number: 108474. Date: 01 Jan 2025.**

Objective: Work with older patients and their carers to co-design a tool that improves patient - general practice communication and continuity of care following discharge of an older person from hospital.

**Armitage, R. C. (2025) ["On Lateness: The Ethics of Running Behind Schedule in General Practice."](#) *Journal of Evaluation in Clinical Practice* 31(1) (pagination), Article Number: e14293. Date: 01 Feb 2025.**

Introduction: GPs, at least in the United Kingdom, often run behind schedule in their clinics. This lateness is an inherently ethical problem due to the negative consequences it generates.

**Bakker, M., et al. (2025) ["Effectiveness of Low-Dose Amitriptyline and Mirtazapine in Patients with Insomnia Disorder with Sleep Maintenance Problems: A Randomised, Double-Blind, Placebo-Controlled Trial in General Practice \(DREAMING\)."](#) *British Journal of General Practice***

BACKGROUND: Low-dose amitriptyline and mirtazapine are widely prescribed off-label for insomnia disorder. However, evidence from placebo-controlled studies is lacking. AIM: To assess the effectiveness of low-dose mirtazapine and amitriptyline in patients with insomnia disorder. CONCLUSION: Compared to placebo low-dose mirtazapine provided a statistically significant and clinically relevant reduction of insomnia severity at 6 weeks, but not at later time points. Low-dose amitriptyline

resulted in a statistically significant reduction at 6 weeks only which was not clinically relevant. Copyright © 2024, The Authors.

**Brainard J., et al. (2025) ['Service Evaluation of 'GP at Door' of Accident and Emergency Services in Eastern England.'](#) *Primary Health Care Research & Development* 26, e5.**

AIM: We describe activity, outcomes, and benefits after streaming low urgency attenders to General practice services at Door of Accident and Emergency departments (GDAE). BACKGROUND: Many attendances to A&Es are for non-urgent health problems that could be better met by primary care rather than urgent care clinicians. It is valuable to monitor service activity, outcomes, service user demographics, and potential benefits when primary care is co-located with A&E departments.

**Captieux M., et al. (2025) ['Does Remission of Type 2 Diabetes Matter? A Qualitative Study of Healthcare Professionals' Perspectives and Views about Supporting Remission in Primary Care.'](#) *Diabetic Medicine* (pagination), Date: 2025.**

Background: Trials conducted in highly selected populations have shown that type 2 diabetes (T2D) remission is possible, but the feasibility and acceptability of supporting remission in routine clinical practice remain uncertain.

**Dakin F., et al. (2025) ['Technostress, Technosuffering, and Relational Strain: A Multi-Method Qualitative Study of how Remote and Digital Work Affects Staff in UK General Practice.'](#) *The British Journal of General Practice : The Journal of the Royal College of General Practitioners* (pagination), Date: 08 Jan 2025.**

BACKGROUND: The introduction of remote and digital forms of working in UK general practice has driven the development of new routines and working styles.

AIM: To explore and theorise how new forms of work have affected general practice staff. DESIGN AND SETTING: Multi-site, qualitative case study in UK general practice.

**Davenport R.A., et al. (2025) ['"No Doctor Ever Asked Me...so I Thought it wasn't a Valid Concern": Endometriosis Patients' Perspectives of Barriers and Facilitators to Sexual Health Communication in General Practice.'](#) *The Journal of Sexual Medicine* 22(1), 26–35.**

BACKGROUND: Sexual health communication between general practitioners (GPs) and individuals with chronic diseases is well documented as an important component of sexual well-being. However, a notable gap exists in understanding factors that contribute to sexual health communication in the endometriosis context. AIM: To explore how individuals with endometriosis perceive their experiences of sexual health communication with GPs to understand the barriers and facilitators of this communication in general practice.

**Ghis Malfilatre M., and Louvel, S. (2025) '[A Medical Profession Towards Empowerment? the Uncertain Future of Digitalization in Private General Practice.](#)' *Social Science and Medicine* 365(pagination), Article Number: 117575. Date: 01 Jan 2025.**

The aim of the paper is to understand what drives private general practitioners (GPs) to introduce digital technologies, and to use them extensively. While prior research has highlighted barriers to adoption for practitioners when digital tools are introduced by managers and policy makers, we explore how GPs having their own practice introduce digital innovation and how they integrate them into their practices. Our qualitative study focuses on liberal emergency medicine in France, providing a unique context to examine how GPs at the front lines of health system failures and changes introduce and adopt digital technologies. Through in-depth ethnographic research conducted from 2021 to 2023, we reconstruct three sequences of digital innovation since the 1990s and observe current digital tool usage among GPs. We put forward two major findings. First, the introduction of digital tools is driven in this context by the organization of GPs as a professional group that aims to enhance its capacity for action and gain recognition for its expertise. Second, the adoption of digital innovations depends on how the changes in practices involved align with the professional culture of these doctors. Tensions between the most recent digital innovation initiatives that take place during and post-Covid 19 crisis, and doctors' understanding of practicing medicine as an "art", leads to the weak adoption and even contestation among GPs.

**Groot L.J.J., et al. (2025) '[Improving Personal Continuity in General Practice: A Focus Group Study.](#)' *British Journal of General Practice* 75(750), e12–e19.**

Background: Personal continuity is an important dimension of continuity of care in general practice and is associated with many benefits including a higher quality of

GP care and lower mortality rate. Over time, changes in society and health care have challenged the provision of personal continuity. Older patients in particular experience more negative consequences from receiving discontinuous care. Aim To explore the perspectives of GPs, older patients, practice nurses, and assistants on improving personal continuity in general practice, and to identify barriers and facilitators that affect this improvement process. Conclusion: As general practice moves towards a more team-based approach to ensure personal continuity, efforts to improve personal continuity should focus on supporting team-based provision of continuous care.

**Howarth T., et al. (2025) ['General Practice Sleep Scale - the "GPSS" - A Proposed New Tool for use in General Practice for Risk Assessment of Obstructive Sleep Apnoea.'](#) *Sleep Medicine* 125, 168–176.**

Background: This pilot study investigated a new simplified OSA screening tool that could be used in primary care/GP settings - the "GPSS" tool - "General Practice Sleep Scale" and compared against common existing OSA screening tools.

**Humphrey, A., et al. (2025) ['GP Remote Consultations with Marginalised Patients and the Importance of Place during Care: A Qualitative Study of the Role of Place in GP Consultations.'](#) *Bjgp Open***

BACKGROUND: Since the COVID-19 pandemic, there has been an increase in the use of remote consultations in general practice in the UK. This leads to the displacement of the consultation outside of the physical general practice, and its 'emplacement' elsewhere, with underexplored consequences for inequities of health care in marginalised groups. AIM: To examine the place-making demands that remote consultations make on patients, and the ways that these affect their experiences of care, with a focus on the impact on patients from marginalised groups. CONCLUSION: Remote GP consultations are not 'place-less' encounters, and inequities in access to suitable spaces may lead to inequities in experiences of care. Attention should be given to ensuring that patients without appropriate spaces for remote consultations are offered in-person care, or consultation times made more specific to allow for organisation of private space. Copyright © 2025, The Authors.

**Jakobs K.M., et al. (2025) ['Transmural Collaborative Care Model for Cardiovascular Risk Management and Medication Review in Patients using](#)**

**[Antipsychotics in Primary Care \(TACTIC\): A Study Protocol of an Incomplete Stepped Wedge Cluster Randomized Trial.](#)** *Contemporary Clinical Trials*

**Communications 44**(pagination), Article Number: 101418. Date: 01 Apr 2025.

Background: It is well established that patients with severe mental illness and those treated with atypical antipsychotics (AAPs) are at an increased risk of cardiovascular disease. However, primary care currently lacks adequate monitoring of AAP usage, its effects, and the associated cardiovascular risk. We have developed TACTIC, a transmural collaborative care model for patients using AAPs prescribed by the general practitioner (GP) to address the issues of potential overtreatment with AAPs and undertreatment for cardiovascular risk. TACTIC comprises three steps: an informative video for patients, a multidisciplinary meeting, and a shared decision-making consultation with the GP.

**Jani Y.H., et al. (2025) '[Characteristics, Risk Factors and Clinical Impact of Penicillin and Other Antibiotic Allergies in Adults in the UK General Practice: A Population-Based Cohort Study.](#)** *Journal of Infection 90*(2) (pagination), Article

**Number: 106367. Date: 01 Feb 2025.**

Objective: To assess the characteristics, risk factors and clinical impact of penicillin and other antibiotic allergy labels in general practice in the UK.

**Killedar A., et al. (2025) '[Cost Savings of Reducing Opioid Prescribing for the Treatment of People with Low Back Pain in General Practice: A Modelling Study.](#)** *The Lancet Regional Health - Western Pacific 54*(pagination), Article

**Number: 101277. Date: 01 Jan 2025.**

Background: Low back pain (LBP) is the leading cause of disability worldwide. Contrary to clinical guidelines, opioids are frequently prescribed early in the management of LBP in primary care, leading to potential harm and downstream healthcare costs. The objective of this study was to model the one-year impacts of strategies that reduce opioid prescribing for low back pain (LBP) in primary care on healthcare costs and overdose deaths Australia-wide and explore the potential for such strategies to be cost-neutral.

**Latham H.A., et al. (2025) '[Exploring Rural Scottish GPs' Migration Decisions: A Secondary Qualitative Analysis Considering Burnout.](#)** *The British Journal of*

**General Practice : Date: 08 Jan 2025.**

BACKGROUND: The challenges of recruiting and retaining rural GPs are well described. UK data suggests high levels of burnout, characterised by detachment, exhaustion and cynicism, plays a role in GP turnover. The contrast is engagement with work. There is limited evidence examining the relationship between work engagement and recruitment and retention in rural areas. AIM: To qualitatively investigate GPs decisions to move or stay in rural areas through exploring areas that can promote work engagement. DESIGN AND SETTING: A secondary analysis of qualitative data of Scottish GPs.

**Manber R., et al. (2025) ['Effects of a Triage Checklist to Optimize Insomnia Treatment Outcomes and Reduce Hypnotic use: The RCT of the Effectiveness of Stepped-Care Sleep Therapy in General Practice Study.'](#) *Sleep* 48(1)**

**(pagination), Article Number: zsae182. Date: 01 Jan 2025.**

Study Objectives: Evaluate a triaged stepped-care strategy among adults 50 and older with insomnia disorder.

**Minshall I., and Neligan, A. (2025) ['The Management of People with Epilepsy in a City Wide Care Home Service, the Impact of a GP with Special Interest in Epilepsy, and Enhanced Health in Care Homes Framework.'](#) *Epilepsy and Behavior* 164(pagination), Article Number: 110239. Date: 01 Mar 2025.**

Background: The incidence of epilepsy increases with age, especially in people diagnosed with dementia. Seizures in an elderly population are likely to have a focal onset, for which sodium channel blockers are the drug of choice. This study reviews the clinical needs and care of people with epilepsy (PWE) in a city wide care home service and assessing the impact of a GP with Special Interest in epilepsy (GPwSle).

**Mokbel K., et al. (2025) ['A Time-Varying Analysis of General Practice Prescribing in the COVID-19 Era: Lessons from Prescription Dynamics in a Pandemic.'](#) *In Vivo* 39(1), 498–508.**

Background/Aim: Pharmacotherapy is vital in medicine, but inappropriate and inadequate use of medications significantly impacts global mortality and morbidity. Increased prescribing may indicate irrational use or prolonged illness, while decreased prescribing could suggest undertreatment, supply shortages, or the availability of safer and, more effective treatments. The COVID-19 pandemic disrupted health systems, potentially altering prescribing patterns. This study



examined its impact on the prescribing patterns of common therapeutic categories and high-risk medicines in general practice in England.

**Moulton, J. E., et al. (2025) ['An Acceptability and Feasibility Study of a Nurse-Led Model of Contraception and Abortion Care in Rural General Practice.'](#) *Journal of Advanced Nursing***

AIM: To assess the acceptability and perceived feasibility of integrating a co-designed nurse-led model of contraception and medication abortion care within rural and regional general practices. CONCLUSION: Overall, participants found the nurse-led model of care to be acceptable and feasible for implementation in rural and regional general practices. This perception carries important implications for policy and practice, highlighting the need for supportive policies to enhance the effectiveness of such models across Australian general practice. IMPLICATIONS FOR THE PROFESSION AND PATIENT CARE: Our findings emphasise the need for initiatives aimed at addressing inadequate funding for nurse-led care, improving documentation of this care, enhancing understanding among general practitioners and nurses regarding the scope of practice for practice nurses, and overcoming training barriers specific to rural areas. Copyright © 2025 The Author(s). *Journal of Advanced Nursing* published by John Wiley & Sons Ltd.

**Norman K., et al. (2025) ['Discussing Weight in Real World GP Consultations: A Video Recording Analysis Study.'](#) *Obesity Science and Practice* 11(1) (pagination), Article Number: e70034. Date: 01 Feb 2025.**

Objective: GPs have a complex role in obesity management due to patients' individualized experience of living with obesity, coupled with the challenge to deliver healthcare messages in non-stigmatizing ways. This study aimed to explore who initiates the topic of weight and how weight was discussed in real-world GP-patient consultations.

**Payne R., et al. (2025) ['Challenges to Quality in Contemporary, Hybrid General Practice: A Multi-Site Longitudinal Case Study.'](#) *British Journal of General Practice* 75(750), e1–e11.**

Background coded thematically and analysed using Since 2022, general practice has multiple theories of quality. shifted from responding to the acute Results challenges full services of using COVID-19 a hybrid to of restoring remote, Quality



occur in efforts the context in UK of general cumulative practice digital, and in-person care. impacts of financial austerity, Aim: loss of resilience, increasingly To examine how quality domains are complex patterns of illness and addressed in contemporary UK general need, a diverse and fragmented practice. workforce, material and digital Conclusion: Contemporary hybrid general practice features changes (digitalisation, physical distancing, extension of roles, and protocolisation) that have had the unintended effect of dehumanising, compromising, and fragmenting care. Policymakers and practices should urgently address the risks to patients and the traditional core values of general practice should be urgently addressed.

**Reeve J., et al. (2025) ['Standing Up for General Practice.'](#) *British Journal of General Practice* 75(750), 4–5.**

**Rinaldi A., et al. (2025) ['Barriers and Facilitators for the Implementation of Delayed-Prescription of Antibiotics in Family Medicine: A Qualitative Study.'](#) *BMC Health Services Research* 25(1), 51.**

BACKGROUND: Delayed prescription is a strategy used in various countries to reduce antibiotic overuse and contend the effects of antibiotic resistance; however this practice is not yet used in Switzerland. The present qualitative study was thus conducted to investigate Swiss patients' attitudes towards the possible implementation of delayed prescription.

**Sinnott, C., et al. (2025) ['What's been Tried: A Curated Catalogue of Efforts to Improve Access to General Practice.'](#) *BJGP Open***

BACKGROUND: Although increasing numbers of appointments are being provided, public satisfaction with access to UK general practice is declining. Previous attempts to improve access have not been systematically collated. AIM: We aimed to identify interventions to improve access to general practice in the UK, to organise these interventions into thematic categories, and to identify which aspects of access are targeted. CONCLUSION: Multiple and diverse attempts have been made to improve access in general practice over a 40-year period. This curated, thematised catalogue offers an important resource for future efforts to improve access. Copyright © 2025, The Authors.

**Slowther, A., et al. (2025) ['Experiences of using the Recommended Summary Plan for Emergency Care and Treatment \(ReSPECT\) in English General](#)**

**Practice: A Qualitative Study among Key Primary Health and Social Care Professionals, Patients, and their Relatives.' *British Journal of General Practice***

BACKGROUND: The Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) has been implemented in many areas of the UK. It is unclear how ReSPECT is used in primary and community care settings. AIM: To understand the extent to which relapse risk and prevention are discussed and managed in general practice. CONCLUSION: The ReSPECT process has not translated as well as expected in the community setting. A revised approach is needed to address the challenges of implementation in this context. Copyright © The Authors.

**Trueman, H., et al. (2025) 'Evaluation of the Personality Disorder Positive Outcomes Programme (PDPOP) in General Practice.' *Bjgp Open***

BACKGROUND: GPs and primary care services have been identified as crucial to the care of people with personality disorder. Individuals living with personality disorder frequently face stigma and difficulties when accessing healthcare. Primary care staff often describe feeling demoralised, incompetent, hurt or angry after difficult interactions with patients. AIM: To evaluate the effect of PDPOP training delivered to 10 GP practices in 2022-23. CONCLUSION: By including lived-experience trainers and introducing core concepts, PDPOP has demonstrated a sustained positive impact on primary care teams. Further expansion of this type of training may help to increase the confidence of healthcare staff in delivering care to patients with personality disorder and similar complex emotional needs. Copyright © 2025, The Authors.

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