

Patient beliefs about their mental illness in a perinatal service

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Introduction

- People's religious and metaphysical beliefs help them make sense of their phenomenology.
- Psychiatric symptoms are primarily a subjective experience which gains meaning through the person's core beliefs and assumptions about themselves, others and the world.
- It is important for psychiatrists to practice ethically and holistically valuing and taking on board patients' views of their illness.
- Good practice standards support tactful exploration of patient's beliefs, and discourage professionals from imposing their own beliefs and values.
- Furthermore, empathic validation of patient's experiences can have a significant impact on the therapeutic alliance and treatment outcomes through the cultivation of epistemic trust in the relationship.
- Whereas a poor therapeutic alliance increases the risk of treatment non-compliance.



Image 1. (left) an artistic depiction of a poor therapeutic alliance with lack of epistemic trust. (right) an artistic depiction of a good therapeutic alliance with good epistemic trust.

Objectives

1. To evaluate whether patients' beliefs about their mental illness are explored and documented whilst under the perinatal services.
2. To evaluate the perinatal staff's perspectives on exploring this in their clinical work.

Materials and Methods

- Patient records from two perinatal services in an urban centre in England were reviewed.
- Patients had to be open to the perinatal team and have an allocated care-coordinator.
- Ten care coordinators and 5 patients per care coordinator were selected.
- Records were reviewed for documented evidence of patient beliefs and whether these was incorporated into the treatment plan.
- The following criteria were used when evaluating records:
 - Have patient's beliefs whether religious or not been documented?
 - Have patient's views of their symptoms/illness been documented?
 - Have patient's beliefs been taken into account when devising a treatment plan?
- In addition perinatal staff (nursing, medical, psychology) were surveyed about their views and current practice around exploring patients' beliefs about their illness.

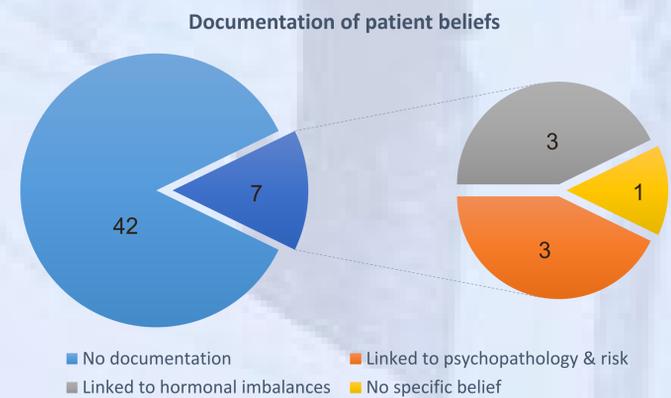


Chart 1. Evidence of documentation of patient beliefs in electronic records. In 7/49 cases there was documented evidence of patient's beliefs. In 3/7 cases this was linked to patient's psychopathology (e.g. delusions) and risk. In 3/7 cases this was linked to hormonal imbalances. In 1 case the patient didn't have any particular beliefs about their symptoms.

Results

Forty nine patient records were reviewed. In 7/49 cases there was documented evidence of patient's beliefs. Out of these in 3/7 cases this was linked to patient's psychopathology (e.g. delusions) and risk; in 3/7 cases this was linked to hormonal imbalances and in 1/7 case the patient didn't have any particular beliefs about their symptoms. Thirty six staff across two perinatal services responded to the survey. Majority either sometimes (14) or rarely (10) asked patients about their beliefs. Most either always (9) or often (15) considered patient's beliefs when devising a treatment plan. All staff (36) thought it's helpful to know about patient's beliefs.



Chart 2. Responses to a perinatal staff (nursing, medical, psychology) survey exploring their perspectives on exploring patient beliefs and incorporating them into a treatment plan. Thirty six staff members responded to all 6 questions.

Conclusions

Even though the majority of staff agreed on the importance of knowing and considering patient beliefs about their illness, it's not something that is routinely asked and documented in patient records. Wider research across other areas of psychiatry would provide a more complete picture. Considering the importance of knowing and holding patient's beliefs in mind for the therapeutic alliance, exploration of patient's views about their illness should be part of a routine psychiatric assessment.

1. General Medical Council (2013). Good Medical Practice.

2. RCPsych Recommendations for psychiatrists on spirituality and religion (2013)

3. RCPsych New Curriculum (2022)

4. Fonagy, P., & Allison, E. (2014). The role of epistemic trust in the therapeutic relationship. *Psychotherapy*, 51(3), 372-380

5. Totura et al. The Role of the Therapeutic Relationship in Psychopharmacological Treatment Outcomes: A Meta-analytic Review. *Psychiatr Serv*. 2018 Jan 1;69(1):41-47.

6. Luyten, P., Campbell, C., & Fonagy, P. (2020). Borderline personality disorder, complex trauma, and problems with self and identity: A social-communicative approach. *Journal of Personality*, 88(1), 88-105.

7. Tessier et al. Medication adherence in schizophrenia: The role of insight, therapeutic alliance and perceived trauma associated with psychiatric care. *Psychiatry Res*. 2017 Nov;257:315-321