

## General Practice - Is it really “The Easy Option”

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Dear Editor

Despite the increasing demands of general practice, primary care continues to be branded as ‘the easy option’ amongst medics and the general public alike. General practitioners (GPs) stifle with disfigured prestige and dominance-based hierarchies, where stale stereotypes and a lack of insight, has resulted in derogatory presumptions that they manage coughs and colds, referring more complex presentations to secondary care.<sup>1,2</sup> Rather than condemning such stereotypes, many GPs have now resigned to this inferiority complex and its associated pejoratives, passively adding fuel to the fire.

There is a lot to be said for the Irish proverb ‘Ní bhíonn an rath ach mar a mbíonn an smacht’ - there is no prosperity without discipline, especially in terms of the modern-day GP. Day in, day out, general practitioners deliver high quality, patient-centred care despite challenging work pressures, coronavirus backlogs and the bureaucratic hurdles of a strained healthcare service. They act as a patient’s first port of call, managing diverse medical presentations and adapting diagnostic and therapeutic skills on a consultation basis. In fact, GPs are fundamental in the provision of a functional and evolutionary healthcare system, facilitating the delivery of demand-based services and reinforcing continuity of care.<sup>2</sup>

Despite this, the recent Irish Medical Council’s *Medical Workforce Intelligence Report* highlights that Irish primary care is operating at an unsustainable pace. Funding shortages, overwhelming administrative workloads, distressing understaffing levels and capacity restraints are only a smattering of trials encountered by GPs on a daily basis. 29.1 million primary care consultations are conducted annually in the Republic of Ireland, yet a 42 percent deficit in national GP numbers

prevails. Staffing shortages have precipitated an undesirable increase in workload, negatively contributing to the current 'workforce and workload crisis'. It is, therefore, unsurprising that GP burnout levels soar at an all-time high.<sup>2,3</sup>

Recruitment of GP trainees is an ongoing challenge. System failure is deterring doctors from entering training schemes in the first place, an inevitable shortcoming for service provision and expansion.<sup>2</sup> Exposure to the reality of the crisis has discouraged doctors from embarking on GP training schemes, luring them to the 'locum life' or the large-scale emigration bandwagon. The urgency for system change is, therefore, uncontested.

Increased undergraduate exposure to primary care and reformation of the medical school curriculum is required to increase the annual intake of GP trainees<sup>3</sup>. By improving working conditions, facilitating better work-life balance and enhancing postgraduate training opportunities, doctor attraction and retention will be prioritised.<sup>4</sup> Cracking the surface tension and remoulding the current reality of primary care will mend its fractured reputation and alleviate the national crisis.

Doom and gloom aside, the proactive and solutions-focused response of GPs should be commended. Instead of digging their heels in the sand, GPs have adopted a 'can do' approach, exuding an air of determination and a willingness to find innovative solutions to support the sustainability of Irish primary care.<sup>2</sup> Perhaps this craving for change recapitulates that it's time to re-strategise and breathe new life into Irish general practice!

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