

## NO MORE SECRETS

Mental health problems used to be kept as deep, dark secrets. Nobody wanted to admit an issue that was commonly seen as a moral failing or a lack of willpower. Depressed? “Put a smile on your face and stop moping around.” You get the picture.

We are fortunately far removed from most of that. But the attitude that mental health issues should be kept secret still lingers among many medical providers. If mental health problems were instead (accurately) called “brain health” problems it might be less common to keep them hidden. We wouldn’t keep neurological diagnoses secret. Why mental health ones?

Just as a patient who takes medication and sees a neurologist for seizures will have all that documented in their primary care chart, the same should be true for a patient with a mental health diagnosis. A chart listing sertraline in the med list without listing the reason for its use and the other professionals (psychiatrist, therapist) involved is a chart that needs updating.

And just as you would call a neurologist with questions about how a patient is being managed or to report new difficulties, the same should happen when a patient seeing a mental health professional is on a confusing array of drugs or tells you about worsening symptoms. Most therapists and psychiatrists have patients sign consents to exchange information with others involved in their care. If you’re not sure your patient has done that, you can use your own consent form. Even though HIPAA rules allow sharing of information without consent for the purposes of continuity of care, some mental health providers will require the extra step of written consent.

When a patient comes for a health maintenance visit, it’s good to update the chart’s list of other caregivers. “What other professionals are helping you with your health?” Because some patients may think you only want the names of people addressing physical health issues, you may not automatically hear about mental health providers. So the second question to ask is “How about any mental health professionals?” And because many patients will tell you the names of their prescription drugs but not nonprescription treatments, it’s important to ask not just “What medications are you currently taking?” but also “How about over the counter medications, herbal treatments and other nonprescription medications?” Many of these are used by patients not interested in prescription drugs to treat mental health symptoms.

Open communication between patients, primary care offices and mental health providers is part of good medical care. Secrets are not.