

Care Opinion Case Studies

We are working with Care Opinion to demonstrate the real stigma and discrimination people experience in the health and social care sector, as well as the good practice which is ensuring people get the help and support they deserve.

Mental Health History Disclosed in Referral

“In December 2019 I started to experience generalised joint pain, swelling and deterioration in function and mobility in all my joints. I have a family history of Rheumatoid Arthritis and associated auto immune diseases so felt I better get it checked out.

“My GP ran blood tests, one of which suggested an issue with the Lupus antibody. I was therefore referred to the Rheumatology Clinic in mid February 2020.

“I also have a history of depression and low mood and chronic pain following a spinal injury. I have been under the care of Psychiatry, the Community Mental Health Team and a CPN for a few years.

“I arrived for the Rheumatology appointment and was greeted by a member of staff who stated, I understand that you are under the care of the Community Mental Health Team and Psychiatry.

“I felt absolutely humiliated!



“The disclosure on the letter of referral about my mental health history had absolutely no relevance to what I was attending for yet it absolutely dictated how I was treated. I felt I had been labelled before I even sat down. The staff member discharged me from the clinic and as I was leaving they told me I could pick up leaflets on Fibromyalgia and Raynaulds Syndrome on my way out.

“I understand about full disclosure and the importance of providing accurate patient history in a letter of referral, but by putting my mental health history front and centre of this letter it completely prejudiced the way I was treated. I have now asked for a second opinion and am awaiting a response.



“The experience left me feeling humiliated and betrayed. Yes, I am the first one to admit I suffer from depression, but when I present with physical symptoms and a family history I expect to be treated on an even playing field. I had hoped that discrimination of this type was a thing of the past in the 21st century, sadly not!”



Professional's Response

Thank you for writing to Care Opinion detailing your experience. I was sorry to learn that you felt your previous mental health history influenced the consultation you had with the rheumatologist, and that whilst you appreciated the necessity for accuracy within the referral letter from your GP, you felt this should have no bearing on the diagnosis.



When diagnosing a medical condition, the consultant will look at the results of all available tests, either done at the hospital setting or within the GP practice, and will take a detailed history from you which will involve your family history. This will enable the clinician to give an opinion on what they feel is the correct diagnosis so that your symptoms are managed effectively. It is therefore necessary for your GP to advise the clinician of any medications you may be taking and the reason why you are taking the medications to allow dual care, ensuring you are not prescribed a medication which may interact with any you are currently taking. You say that you have requested a second opinion, and I hope your second consultation will be more satisfactory.

You can find the latest stories at <https://www.careopinion.org.uk/> and searching 'mental health', or checking out our website <https://www.seemescotland.org/health-social-care/>

