

Mental Health and Diabetes

Bruce is a 51 year old male truck driver. Approximately 18 months ago Bruce separated from his wife. He has two adult sons from this marriage, with whom he is in regular contact.

Bruce has Type 2 diabetes for which he was diagnosed seven years ago by his GP. In that period his GP maintained the treatment and management of Bruce's diabetes, until approximately 18 months ago when Bruce moved out of the area after his marriage broke down.

Bruce is in a new relationship with Shar-Lee. You are Shar-Lee's GP. She comes to see you for a regular check up and shares her concern that of late Bruce 'has not quite been himself, something is not quite right with him'. Shar-Lee also happens to mention that Bruce's oldest son was recently charged with armed robbery and is in remand awaiting trial.

You advise Shar-Lee that Bruce needs to see his GP. When Shar-Lee responds that he doesn't have a regular GP you agree to see him.

Approximately six weeks later Bruce makes an appointment to see you. Bruce is on metformin (850mg x 3 daily) for which he requires a repeat prescription. He insists that this is the only reason he has come to see you.

Bruce presents as abdominally overweight with a pallid complexion, smells of cigarette smoke and has a general appearance of disarray. He appears tired and withdrawn and complains about not getting enough sleep. During the consultation he fidgets and avoids eye contact.

You have a sense Bruce is resisting engaging with you. Although it is your first consultation with him, Shar-Lee's comment that Bruce is 'not quite right' resonates with you.

Did you know...

MHPN has a series of webinars that cover a range of topical mental health issues. Visit www.mhpn.org.au to learn more.

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