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## Integrating mental health into Primary Care – the Swiss model



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Integration of mental health boasts a long tradition in Swiss psychosomatic medicine. It can be defined in two ways:

- first, a form of comprehensive care for the patient, presupposing a corresponding theoretical and therapeutic approach;
- second, a scientific discipline devoted to study of the relationships between biological, psychological and social factors, to explain health and sickness.

The first definition applies to the situation of psychosomatic medicine in Switzerland, in the sense of a global model of thought and action capable of finding practical application in all medical disciplines by interlinking them. As in other countries, incidentally, this model has chiefly taken hold in General Practice, rheumatology and gynaecology/obstetrics. In General Practice and gynaecology, psychosomatic medicine now forms an integral part of postgraduate training through teaching which encompasses theoretical knowledge and competence and aptitudes, in the sense of a basic expertise in the psychosomatic field. At university level psychosomatic medicine has its own departments in Basel and Bern as part of the internal medicine sector. In Switzerland psychosomatic medicine is chiefly represented by doctors in private practice who themselves belong to various medical disciplines. By creating, in 1998, a certificate of further training in psychosomatic and psychosocial medicine, the FMH (Swiss Medical Association) has for some years now offered the opportunity of acquiring a specialist qualification. In the beginning different tendencies existed side by side which were eventually integrated into a unitary framework, the Swiss Academy for Psychosomatic and Psychosocial Medicine (SAPPM). These tendencies can be characterised as follows:

- Case discussion groups, inspired by Balint and promoting a psychodynamic hermeneutics.
- Doctors using corporeal approaches, often based on energetic theories in which emotional bodily experience is central.
- Liaison psychiatry, operating in general hospitals and their outpatient services, for somatic cases involving a psychiatric problem. Here Engel's biopsychosocial model prevails.
- Von Uexküll's psychosomatic approach, in the German tradition.

The various tendencies are largely determined by the theoretical or epistemological model invoked: psychoanalytical, energetic, sys-

temic, and, more recently, cognitive-behavioural. Also, each of Switzerland's linguistic regions has its tradition in this domain. Gradual merging of these various tendencies in a single association, the SAPPM, has resulted, in the different Swiss regions, in continuous education formulae carrying entitlement to an FMH-recognised title of "psychosomatic and psychosocial medicine" (further training certificate). To be noted is the cooperation between SAPPM and Swiss associations of Primary Care, internal medicine and psychiatry, and also with the universities for further training certificates which also qualify for ECTS credits.

The training is not confined to the family doctor's psychiatry but aims to equip him with tools to bypass the somatic complaint and give it a meaning. Special emphasis is placed on the analysis and development of the relational dimension, with the aim of integrating the complexity of every clinical situation. In short, its objective is to equip the practitioner to undertake a "psychosomatic therapy" so conceived officially in the medical tariff. The various levels of care of our patients in psychosomatic medicine can be formulated according to D. Lefebvre:

- basically, warm reception, listening, time and emotional support;
- mastery of communication skills;
- knowledge of the stages of change and motivational interviewing (di Clemente);
- support or assistance function to help the patient to use his/her resources (support therapy);
- a psychosomatic therapy technique properly speaking, which requires personal training and work (cognitive-behavioural therapy – psycho-corporeal approaches – hypnosis – systemic model – psychoanalytical model);
- supervision;
- capacity to address the patient in the psychiatrist's office and cooperate with the latter.

There will be an SAPPM stand during the Wonca Conference and workshops will be staged.

Further information on our Web site: [www.sappm.ch](http://www.sappm.ch).  
History of the psychosomatic movement in Switzerland:  
<http://www.sappm.ch/fr.php?site=history> (in French)  
or [http://www.appm.ch/pdf/Psychosomatik\\_Schweiz.pdf](http://www.appm.ch/pdf/Psychosomatik_Schweiz.pdf)  
(in German).

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