# Addressing loneliness: a critical issue in primary care



A recent article by Professor Lisa McNally, published by the Centre for Mental Health, highlights the critical and often overlooked issue of loneliness within the healthcare system, particularly in primary care settings.

Professor McNally reflects on the comprehensive understanding her general practitioner (GP) has of her physical health, including essential metrics such as blood pressure, cholesterol, height, weight, and lifestyle habits like smoking and drinking. However, one significant aspect of her wellbeing remains unaddressed; her GP has never inquired about her feelings of loneliness.

Research indicates that long-term loneliness can increase the odds of early death by 26%, as well as elevate the risks for various health conditions, including heart disease, stroke, dementia, depression, and anxiety. Moreover, loneliness is linked to increased health care costs, regardless of other demographic, economic, and lifestyle factors. Community initiatives aimed at combating loneliness have been known to lead to a decrease in emergency hospital admissions, suggesting that addressing this issue may mitigate broader health concerns.

If GPs were to address loneliness directly, they could potentially connect patients like Professor McNally with social prescribers, who are trained to help individuals access community activities that can alleviate isolation. Professor McNally urges that these conversations are not solely the responsibility of healthcare providers, as the stigma associated with loneliness often inhibits individuals from voicing their concerns to various entities, including employers and friends.

The Royal College of General Practitioners (RCGP) supports this view, stating that many GPs are often the only human contact that chronically lonely patients have. According to the RCGP, three out of four GPs report that they see between one and five patients daily who primarily visit due to feelings of loneliness. This recognition highlights the importance of primary care in addressing not just medical needs but also social wellbeing.

To effectively tackle loneliness, a multifaceted approach is required, involving collaboration among local authorities, the voluntary sector, and various community partners to develop and sustain initiatives aimed at eradicating social isolation. Professor McNally provides an example of the Worcestershire Public Health initiative, “We are Westlands,” which illustrates how local partnerships can leverage funding for community programs that improve health and wellbeing outcomes.

Recent neighbourhood health guidelines issued to the NHS advocate for the creation of “healthier communities” and emphasise the role of social prescribing within integrated neighbourhood teams. These guidelines explicitly mention loneliness as a demand driver and describe how a neighbourhood health approach can facilitate collaboration between local councils, public agencies, and third-sector organisations, ultimately leading to clearer pathways for non-medical support.

Professor McNally asserts that local systems addressing loneliness within their health approach can significantly enhance population health, reduce service demand, and reinforce community ties. However, she acknowledges a pressing challenge: health professionals must find the time and space to engage with patients on this sensitive subject. The stigma surrounding loneliness often fosters a culture of silence, where neither party feels comfortable discussing the issue.

In closing, Professor McNally suggests that if health professionals can muster the courage to broach the topic of loneliness with their patients, it could lead to some of the most impactful and positive conversations within the healthcare setting.

Source: [Noah Wire Services](https://www.noahwire.com)

## References

* <https://www.centreformentalhealth.org.uk/social-prescribing-power-community/> - This URL supports the concept of social prescribing and its role in addressing loneliness by connecting individuals with community activities, which can improve health outcomes and reduce healthcare costs.
* <https://www.centreformentalhealth.org.uk/loneliness-dont-ask-dont-tell/> - This article highlights the importance of addressing loneliness in healthcare settings and how local systems can tackle it by integrating community approaches. It also emphasizes the challenges of discussing loneliness due to stigma.
* <https://www.kingsfund.org.uk/topics/primary-and-community-care/social-prescribing> - This URL provides information on social prescribing, which is a practice that links patients to community services, potentially alleviating loneliness and supporting overall well-being.
* <https://journals.sagepub.com/doi/abs/10.1177/1745691614568352> - This study supports the claim that loneliness increases mortality risk. It highlights the negative health impacts of social isolation, including increased risks of heart disease, stroke, and dementia.
* <https://www.rcgp.org.uk/about-us/newssubscription/press-releases/2019/gps-see-lonely-patients.aspx> - This article from the Royal College of General Practitioners (RCGP) indicates that many GPs encounter patients who are chronically lonely, emphasizing the role of primary care in addressing loneliness.