

**Instructions to candidate** – Aim for 8 minutes

**You are a foundation doctor doing your general practice.**

**John Smith is a 30 year old gentleman who was recently diagnosed with depression. He was prescribed with sertraline. He has come in today asking for a doctor to provide more explanation for this medication.**

**You are asked to counsel John on sertraline and address any concerns that he may have.**

## SP script

**Name:** John Smith

**Age:** 30 years old

You have recently been diagnosed with depression. For the past month, you have been experiencing low mood, loss of energy, accompanied with some loss of appetite and changing sleeping pattern. Your partner made you see the doctor as it had started to affect your relationship. Your doctor diagnosed you with depression and prescribed you with a medication which you can't remember its name.

PMH – occasionally you have tension headache and muscle-strain related backache

FH – Nil

DH – paracetamol for headache, ibuprofen for backache; NKDA

SH – you smoke 20 cigarettes a year for 10 years, you rarely drink alcohol and you admit to smoking weed occasionally to release some “tension”. You run a few convenient shops. You live with your partner in a flat and have a dog.

ICE/Questions

- I – you know what depression is and you don't need an explanation for this
- C – you are concerned about this medication as you have forgotten much about what the doctor had told you previously
- C – you are a bit hesitant about starting this medication and you wonder if depression will go away with some lifestyle changes which you would also like to discuss with this doctor
- E – you are hoping that the doctor today could provide some information on this medication
- Questions (if haven't already explained by the candidate)
  - o What is the medication called?
  - o How does it work?
  - o How often to take in a day?
  - o How long do you have to take this medication?
  - o Can you take this medication with the ones that you are currently taking? You've heard a lot about the side effects of ibuprofen and you hope this medication won't potentiate any side effect

## Feedback

Did the candidate	Y/N
Establish a quick history from the patient	
Ask if patient has allergies	
Explore if the patient is taking any other medication	
Provide appropriate explanation on the use of sertraline, including its usage, side effects and the length of treatment	
Discuss other ways to manage depression	
Provide an appropriate explanation to patient's questions	
Explore ICE in a patient-centered manner	

## Sertraline

- It is an anti-depressant medication
- It works by changing the level of a certain type of chemical in the brain, which helps to alleviate your mood and makes you feel better
- Take one tablet orally once every day
- One aspect to discuss about this medication is that (unlike paracetamol or ibuprofen) you won't feel the effect of sertraline that quick. It takes about 4-6 weeks for the effect to come in and therefore, consistency is key
- Some common side effects include feeling nauseous, tummy upset, and diarrhea, but they shouldn't be long lasting
- If the patient is experiencing about any side effects and the side effects are bothering them then they can come back to see their GP
- One important side effect of anti-depressants is that, in some people, for the first 2-4 weeks of taking the medication it may cause the depression to get worse and even cause suicidal thoughts. If this happens make sure to come back to see your GP immediately.
- There are many different types of anti-depressants and how well it works is specific to the individual
- Therefore, you will have a review with a doctor to see if the dose of the anti-depressant is appropriate for them
- Once you are on a stable dose and your mood improves, you will continue to take this medication for some months. Depending on the severity of the depression, normally one would need to take the medication for approximately six months to help with their mood long term
- Don't stop this medication suddenly as it may cause antidepressant discontinuation syndrome, where you experience physical symptoms and a sudden drop in your mood upon sudden stopping of your anti-depressant
- Your doctor will discuss with you ways to slowly taper yourself off this medication
- According to BNF, sertraline and ibuprofen can increase the risk of bleeding (and hyponatraemia), so you can switch ibuprofen for other simple painkiller such as paracetamol
- There are other ways to help improve your mood too such as cognitive behavioral therapy and a healthy lifestyle (exercise, surround yourself with supportive friends and environment, identify any manage your stressors, avoid taking recreational drugs)