



Common Basal Concept in Primary Care Medicine and Psychosomatic Medicine

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Keywords: Bio-psycho-social; Psychosomatic medicine; Japanese Primary Care Association; Japanese Society of Psychosomatic Internal Medicine; Hinohara-ism

Abbreviation: PSM: Psychosomatic medicine; JPCA: Japanese Primary Care Association; JSPM: Japanese Society of PSM; JSPIM: Japanese Society of Psychosomatic Internal Medicine; WONCA: World Organization of Family Doctors

Primary care medicine has been crucial field for its principle and characteristic functions. Initially, five items were introduced by Institute of Medicine (IOM) in 1978. They are known widely, including Accessibility, Comprehensiveness, Coordination, Continuity and Accountability (ACCCA) [1]. After that, Professor Saultz proposed 5 kinds of cares, which are Access to Care, Comprehensive Care, Coordination of Care, Continuity of Care and Contextual Care (ACCCC) [2]. Furthermore, Starfield's four principles are known as First contact, Longitudinality, Comprehensiveness and Coordination [3]. From mentioned above, the concept becomes the basis and the practical framework involves the structure, the process and the outcome.

There is a meaningful history concerning the development of primary care. People have hoped ideal doctors who can take care physically and psychologically [4]. Medical practice has developed for long years, but there were growing concern about the necessity for increasing comprehensive and continuous patient care [5]. In 1966, there was a famous report from the Citizens Commission on graduate medical education, which was Millis report [6]. It showed the tendency of fragmentation of care and depersonalization of medicine and recommended the necessity of a physician who can manage the patient from the holistic aspect. The percentage of family physician potential in every 9 years from 1931 to 1957 were 75%, 67%, 55%, 45%, respectively, indicating acute decreasing of family doctors [7]. After that, Family practice was initiated as a new specialty from the Specialty American Boards.

In the light of medical practice quality in primary care, IOM presented six aims for the improvement of health care system function. They are safe, effective, patient centered, timely, efficient, equitable [8]. Among them, patient centered is the key. Furthermore, the committee offered 10 guiding rules concerning patient-clinician relationships for the 21st century. Out of these ten, especially 3 points are important, which are 1. Care based on continuous healing relationships, 3. The patient is the source of control and 6. Safety as a system property [8]. Thus, primary care has the direction of patient centered management. In other words, primary care would include holistic point of view associated with taking care of the body and soul as a human being.

Primary care medicine has developed in various manner in each country. They are Family medicine in United States, general practice in European countries and general internal medicine in Japan.

In the case of Japan, Primary care medicine was introduced and launched by Dr. Hinohara who was the president emeritus of Saint Lukes' International Hospital, Tokyo. He has developed primary care for long period [9]. Then, he has been called "*the father of Primary*

Care in Japan." His contribution also brought the current activities of Japanese Primary Care Association (JPCA).

Japan has long history and characteristic oriental culture, associated with feeling love for all creatures and nature environment. Taking these into consideration, Dr. Hinohara often emphasize the importance of "the combination of mind and body". Consequently, he developed not only primary care medicine, but also psychosomatic medicine in Japan.

There are common important basal philosophy in primary care and psychosomatic medicine (SPM). These factors are the concept of interrelationship of mind and body, bio-psycho-social points of view and so on [10]. Health in the primary care has been influenced by not only biological, but also psychological and social factors. They include multi-morbidity of some diseases, morbidity burden, patient's complexity and other health-related individual attributes [11].

In the daily medical practice of primary care, there are various health problems. Among them, one of the interesting problems would be Medically Unexplained Symptoms (MUS) [12]. This has other medical terms, such as Somatic Symptom Disorders (SSD), Functional Somatic Symptoms (FSS), bodily-distress syndrome, somatic symptom distress and so on. There are several discussion and controversy concerning MUS and related situations, because these have ambiguity of symptom and diagnosis in actual clinical practice [13,14].

According to several data, MUS has been observed about 10-15% out of all consultations in GP office [15]. Other reports with the study of clinical prevalence of FSS showed approximately from 9% to 30% [16,17]. It seems rather difficult to show precise and correct ratio of MUS, because there are a variety of physical and psychosomatic problems in the daily primary care practice. Consequently, clinical study will be expected in the overlapped field of primary care and psychosomatic medicine.

As regard to psychosomatic medicine, its basic portion exist not in the psychiatry but in the internal medicine. It can also treat patients in the psychological aspect carefully as we as in the physical aspect. The Japanese Society of PSM (JSPM) was established in 1959 and the first Department of Psychosomatic Internal Medicine in the university was started in 1963 [18]. PSM in Japan has revealed a prominent, unique development. It is comprised from medical doctors such as Psychosomatic Internal Medicine (PIM) specialists, general internists, psychiatrists, pediatricians, obstetricians and gynecologists, dentists, dermatologists and others [10].

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Along with the development of JSPM, Japanese Society of Psychosomatic Internal Medicine (JSPIM) was founded in 1996. It is another major society with mainly composed of internists [19]. After that, the first joint congress of five major PSM associations from each field was held in 2009. They included the Japanese Society of Psychosomatic Medicine, Psychosomatic Obstetrics and Gynecology, Psychosomatic Pediatric Medicine, Psychosomatic Dental Medicine and Psychosomatic Internal Medicine. Furthermore, several subdivided societies have been established for cardiovascular, digestive, dermatological and oriental medicine [20].

JSPM and JSPIM participate in international activities including publishing BioPsychoSocial Medicine (BPSM) [10]. It plays a crucial role in continuing research in psychosomatic medicine, especially focusing on mind-body relationships [21]. It covers all fields such as behavioral and social sciences, neuroscience, stress physiology and epidemiology, psycho-neuro-endocrinology/immunology and psychoneurology, all of which are associated with mind-body interactions [21].

PSM in Japan has continued practice and research on psychotherapies, including transactional analysis, autogenic therapy and cognitive behavioral therapy. For mutual interrelationship, Japanese Union of Associations for Psycho-medical Therapy (UPM) has promoted various activities [10].

Michael Balint emphasized "*the necessity to cultivate communication between patients and physicians for better treatment from the biopsychosocial point of view*" [22]. Furthermore, primary care physicians with PSM skills compared to psychiatrists can manage variety of health problems. In the near future, systematic cooperation between primary care and PSM would be expected to develop with mutual understanding and cooperation.

In summary, primary care and psychosomatic medicine have close relationship in the light of the bio-psycho-social model system [23]. For years, psychosomatic medicine in primary care has been effected by the physicians and psychoanalysts who emulated Balint's approach for psychosomatic and holistic perspectives [22]. Furthermore, the philosophy of Hinohara-ism would be involved in the basal concept [24]. We would expect the development of practice and research of these field for the wellness and happiness of the people.

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