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主编荐读

虽然跌倒及其影响因素并非纯粹的医学问题,但全人群视角的全科医学服务在预防和管理跌倒上发挥关键作用。吴延等对2022年版《世界指南:老年人跌倒的预防与管理》进行翻译和解读,从跌倒的风险筛查,到跌倒风险综合评估,再到跌倒风险管理,为中国在“人口老龄化”背景下发展更相关和高质量的全科医学服务提供了综合性、国际化的经验与建议。从全科医学的角度,该指南仍可以从心理学和社会学角度进一步充实跌倒的影响因素和管理建议。跌倒的预防和管理更符合公共卫生学的范畴,如何将基本医疗服务和基本公共卫生服务结合起来,并让居民、家庭、社区能够对跌倒做到“知情”和“采取预防行动”?如何让社区医疗和社区服务团队得到更好的培训,并制定有效机制激励基层卫生团队主动开展跌倒高危因素的筛查与管理?这些都是可以进一步研究的方面。

与预防和管理常见跌倒问题相对应的,是本期介绍的另一篇针对罕见问题国际共识的解读。孙文文等对《软骨发育不全患者的诊断、多学科管理和终身护理国际共识声明》进行了要点解读,关注患者的全生命周期管理及临床问题的多学科管理,让同仁们对儿童期罕见病有了更新的认识。以罕见病患者为中心,聚焦提升基层罕见病筛查能力,会成为基层开展罕见病防治工作的重点任务。但可以注意到,原共识的参与者是各国儿童医院或研究中心的专家,那么该共识对全科医学服务的意义如何,是需要全科医生来做进一步解读的。延伸而看,如果指南/共识不是为全科医学量身定制的,那么这就给全科研究打开了一扇新的“窗户”。

本期继续关注家庭医生签约这一研究主题。从社会学角度考察社会信任和医生观点,采用问卷了解利益相关者的反馈,关注社区药师和全科团队的合作,对分级诊疗和预约服务开展研究,进一步充实了社区卫生服务和全科医学管理的研究内容。

“认知障碍专题研究”和“糖尿病管理专题研究”关注老龄化社区的常见医学问题,有特别兴趣的全科医生可以深入阅读和思考。家庭或亲密关系暴力问题是被掩盖的社会问题,但更是生理-心理-社会模式下的典型话题。“全科医生诊室”栏目给同仁们的启发是:如何研究和应对这种富于文化背景的社会问题?全科医生应该做什么,能做什么?



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