Improve the mental health of communities
About the Royal Australian and New Zealand College of Psychiatrists (RANZCP)

The RANZCP is a membership organisation that prepares doctors to be medical specialists in the field of psychiatry, supports and enhances clinical practice, advocates for people affected by mental illness and advises governments on mental health care. The RANZCP is the peak body representing psychiatrists in Australia and New Zealand and as a bi-national college has strong ties with associations in the Asia-Pacific region.

The RANZCP has more than 8,000 members including more than 5800 qualified psychiatrists. Psychiatrists are clinical leaders in the provision of mental health care in the community and use a range of evidence-based treatments to support a person in their journey of recovery.

Introduction

The RANZCP welcomes the opportunity to contribute to the inquiry into diabetes being conducted by the Australian House of Representatives Standing Committee on Health, Aged Care, and Sport (the Committee). Informed by feedback from a range of members of the RANZCP’s expert committees, the below submission provides our recommendations regarding key considerations for the Committee in developing their report.

The RANZCP is also a signatory to the Equally Well Consensus Statement, which details the interrelated nature of mental health and physical wellbeing. We strongly encourage the Committee to consider this Consensus Statement in developing their report.

RANZCP recommendations

Recommendation 1: People experiencing mental health conditions be considered a priority population for the management and prevention of physical health conditions including diabetes.

Recommendation 2: Investment is required in specialist, multidisciplinary health services to support people with a mental health condition, particularly conditions that tend to be long-term and complex to treat.

In 2012, The Australian National Mental Health Commission identified the higher rates of physical health conditions among people also experiencing mental ill-health as a significant issue for health care in Australia.[1] As of 2022 an estimated 1.8 million Australians – 9% of adults – have been reported to experience both a mental and physical health condition.[2] The current Australian National Diabetes Strategy 2021 - 2030 also recognises people with mental health disorders as a priority population.[3]

There are a range of factors which contribute to this higher incidence of physical co-morbidity, which include the direct symptoms of a mental illness, the side-effects of medications, a greater likelihood of living in poverty or under financial stress, and modifiable lifestyle factors.[4-6] While physical comorbidity can occur regardless of a person’s particular mental health condition, it may be more likely if the mental illness is long-term and severe.[4] For example, in addition to the direct symptoms of their mental health condition, people experiencing psychotic illness are more likely to have higher rates of smoking, alcohol and other drug dependence, cardiometabolic ill-health, and overweight or obesity.[4]

The side effects of medications used in the treatment of mental illnesses such as anxiety, depression and schizophrenia (e.g., antipsychotics) contribute to cardiovascular disease, unwanted weight gain and obesity, and diabetes.[3, 4]
The result is that for some people, managing their mental health negatively impacts their physical health. For people experiencing schizophrenia, diabetes is a contributing factor to the estimated 15 – 20 years lower life expectancy than the general population.[7, 8] For people with difficult to treat schizophrenia (approximately 33%) the most effective drug for reducing symptoms, clozapine, is also associated with the highest rates of obesity and metabolic disorders.[8]

Unwanted weight gain can in turn negatively impact a person's mental health. It can affect participation in activities such as hobbies the person used to enjoy, thereby reducing that person's access to social supports that can assist in maintaining a person's wellbeing. People can also experience significant social stigma associated with weight gain and in some cases, this can increase the risk that a person with long-term psychotic illness may cease taking their prescribed medication.[4]

It is the RANZCP’s view that reducing instances of diabetes and improving the overall health of people with mental health conditions is best achieved through the provision of multidisciplinary care. For some people, such as those with long-term complex mental health conditions, holistic support will include psychiatric care alongside expert practitioners in physical health. While most services focus on the general population, providing specialist support for people with long-term and complex mental health conditions can help contribute to reducing the higher rates of diabetes and overall mortality experienced by that population.[4, 7, 9]

Psychiatry plays a role in providing support and education to patients regarding psychotropic medication side-effects and their management, and in the investigation of novel treatments to assist in the management of the metabolic side effects of drugs such as clozapine. General practitioners and allied health workers contribute to holistic care through supporting physical health and facilitating ongoing mental health assessment and engagement with mental health professionals. The RANZCP advocates for investment in specialist treatment services that bring together a multidisciplinary team in order to provide holistic support for this population with the aim of contributing to reducing the disparity between people with mental health conditions and the broader population.[4, 10]

Initiatives focused on helping people manage weight gain as a side effect of their medication can contribute to reducing rates of obesity and improving the overall health of people with schizophrenia. For example, providing access for people with schizophrenia to a specialist metabolic clinic as part of their multidisciplinary care may assist in improving a patient’s metabolic health.[9]

While there is a notable lack of effective treatment to support people with antipsychotic-related metabolic syndrome, new research being conducted in Australia is showing promise. The potential of two diabetes drugs to reduce antipsychotic drug-related obesity is being investigated, and the RANZCP suggests that the Schizophrenia Weight, Metformin and Semaglutide (SWiMS) Trial may be of interest to the Committee in drafting their report.

We additionally note the cost of weight management medications as a concern. People experiencing mental ill-health are more likely to experience poverty or financial stress which makes medical interventions, such as surgery, financially inaccessible. Making appropriate weight management medications more available to those experiencing poverty or financial stress may assist in improving equitable access to treatment.

The RANZCP also recommends the expansion of weight management services generally, as our members report that areas can be underserviced and feature consistently long wait lists. Access to weight management clinics should be available to every community member who needs it.

**Conclusion**

The RANZCP appreciates the opportunity to contribute to the Committee's inquiry into diabetes.
We encourage the Committee to also consider in the RANZCP’s expert consensus statement for the treatment, management and monitoring of the physical health of people with an enduring psychotic illness (the expert consensus statement) in the development of their report. The expert consensus statement includes guidance for all mental health professionals on supporting people with an enduring psychotic illness, including in maintaining the best physical health possible.

People experiencing mental ill-health are at a higher risk of experiencing physical ill-health, including conditions such as diabetes. The RANZCP endorses efforts to support this population by providing the highest quality mental and physical healthcare so that every Australian can live their life in the best health possible.

References