

# In the aftermath of a catastrophe

The Christchurch earthquake, February 2011

An interview with Dr Chris Leathart, GP, Christchurch and a member of the **bpac<sup>nz</sup> Clinical Advisory Group.**

On Tuesday 22 February, 2011 at 12.51 pm the lives of hundreds of thousands of Cantabrians were changed forever. This devastating and catastrophic event would have both immediate and long-lasting effects for thousands of people in New Zealand and around the world. Now three months on from the earthquake, we speak to Christchurch GP, Dr Chris Leathart about his experiences and observations of how Canterbury is coping.

On the day of the earthquake, Chris was consulting with patients in his Bishopdale practice, much like any other Tuesday. He had an elderly couple with him when the building started to shake violently. Luckily the practice did not sustain any significant damage and after ensuring his patients could get home safely, Chris continued with his work. Practice staff listened to the 1 o'clock news on the radio, when early reports were coming in. For the Bishopdale practice, business continued mostly as usual for the afternoon, staff largely unaware of the extent of the damage and graveness of the situation. Chris recalls listening to another news bulletin at 3 pm and feeling shocked by reports of fatalities and destruction in the city, especially to the Christ Church Cathedral.

**"I thought...my god, if the spire has fallen off, this must be big...it was symbolic."**

Bishopdale is located in the west of Christchurch, an area which escaped the worst of the damage. On the day of the earthquake, Chris did not see any patients with acute injuries, but told us that his colleagues from other parts of the city were kept busy with trauma cases. In the days immediately following the event, there was an increase in people, mainly elderly people, presenting with chest pain. Interestingly, there are anecdotal reports that presentations at the hospital emergency department and After-hours Surgery decreased in the 24 hours following the earthquake, and continue to remain lower than expected.

**"People seem reluctant to travel into the city...they feel that they don't want to waste the hospital's time and that their emergency is not important enough."**

This decrease in patient numbers is not being mirrored in general practice. Since the February earthquake, attendances at general practices have risen dramatically (other than in some Eastern suburbs where many people

have moved out). This is in part due to many practices being unable to operate because of damage or access restrictions, creating displaced patients that must find new GPs and practices that are still able to take enrolments. This places extra pressure on general practice staff and resources are stretched to cover. Chris is concerned that “doctor stress” may become a significant factor and he notes that the Medical Protection Society, in conjunction with the New Zealand College of Clinical Psychologists and Pegasus Health, is offering free counselling for general practice staff in Christchurch.

The pervading medical issue in the aftermath of the earthquake is psychological stress. Chris separates those experiencing stress into three categories; children, especially those aged under ten years, who are traumatised by aftershocks and frightened to sleep in their own beds; elderly people (particularly women) and those living alone, who are frightened and anxious; and people with pre-existing mental health problems. Chris has observed that alcohol consumption among patients has increased, along with associated problems such as domestic conflicts and violence.

While the aftershocks continue and much of the city is still in a state of disrepair, it is difficult to reassure patients that the worst is over. Psychology and counselling services are available across Christchurch and a website set up by the Christchurch City Council and Environment Canterbury has some resources suitable for patients. Chris has avoided medicating children and adults who are experiencing stress, but has prescribed some elderly patients a short-term course of zopiclone and lorazepam – combinations of which are no doubt being frequently prescribed across the city. Not surprisingly, the status of many people with pre-existing mental health conditions has worsened, although Chris has not seen an increase in new occurrences of clinical depression.

For many people who have experienced a traumatic and ongoing event such as the Christchurch earthquake, life is regarded as precarious. It becomes challenging to convince people to focus on long-term health goals when

their immediate mortality is more of a concern. Chris has noticed a reluctance among many patients to take on board advice about smoking cessation, healthy eating and exercise. Ex-smokers have relapsed and taken up smoking again and prescription of smoking cessation medicines is down, although not through lack of offering advice.

**“People are generally not looking after themselves as well...there is less interest in general health issues.”**

The anticipated increase in the circulation of infectious diseases in Christchurch, particularly gastroenteritis, did not eventuate. However, there is an increase in respiratory illness, which is likely to worsen over the next few months as people experience winter in sub-standard housing. Many houses are leaking, cracked or without heating and those with sound houses may find that they are now facing an overcrowded environment with relatives and friends “bunking in”. The dust created as a result of the earthquake debris has been reported to have caused exacerbations in people with asthma and COPD.

As time goes on, the people of Christchurch are continually faced with new challenges. In Chris’s experience, some of those who were the most affected in the earthquake, through loss of loved ones, homes or employment, are coping the best, having been in the darkest place and finding the strength to pull through. The people who were not as directly affected seem to be struggling the most now, worried about what might happen and the uncertainty of how they would deal with it.

The Canterbury spirit is strong and the resilience of its people is remarkable. But there is no doubt that life in Christchurch is difficult and people are feeling insecure. There is real concern that this chaotic lifestyle is not sustainable in the long term and that soon people will crash from the sheer exhaustion of living in this broken city.

Our gratitude and support goes out to Chris and the hundreds of other dedicated general practice staff in Christchurch looking after their people.