

Health care for Syrian refugees: A guide for Canadian physicians

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What unique health needs will Syrian refugees face, and how can Canadian physicians best provide health care to them and their families? A practice article posted online today in *CMAJ (Canadian Medical Association Journal)* provides recommendations on screening and advice for primary care physicians to deal with this specific population's health care needs. The goal of health settlement is to link newly arriving refugees to the primary health care system.

Canada, like other many other countries, is preparing for a large influx of Syrian refugees, with an estimated 25,000 newcomers or more to arrive in the next 12 months. Many of these families will have lived for the past 3-4 years in refugee camps in the Middle East. Although all refugees will have received a government Immigrant Medical Examination as part of the immigration process, Canadian physicians will need to provide a health assessment as part of the health settlement process.

In terms of mental health, practitioners should convey willingness to talk about traumatic events. However, pushing for disclosure of [traumatic events](#) in well-functioning individuals who have survived torture could be harmful. Individuals with high levels of symptoms or persistent impairment over several months should be referred to appropriate psychotherapeutic interventions.

"We hope these recommendations will help physicians provide evidence-based care for Syrian refugees," states Dr. Kevin Pottie, a family

physician at the Bruyère Research Institute and the Department of Family Medicine, University of Ottawa, Ottawa, Ontario. "Refugees will have encountered the trauma of war, repeat displacements, refugee camp life and poverty. Access to safe housing, employment and [health care](#) may have strong protective health effects."

Recommendations for caring for asymptomatic [refugees](#) include:

- Not screening routinely for trauma, but physicians should be alert for anxiety, sleeplessness, depression and other mood disorders that could be linked to post-traumatic stress disorder
- Vaccination of children and adults without valid records for measles, mumps, rubella and other illnesses, depending on age
- Screening of all children and adults for chronic Hepatitis B and vaccination of people who are at-risk
- Not screening for tuberculosis as incidence is low in the Middle East

The authors suggest that physicians should also consider screening for Hepatitis C, testing and vaccination for varicella (chicken pox) in people who may be susceptible and serology for the intestinal parasite *Strongyloides*.

More information: "Caring for a newly arrived Syrian refugee family", which will be published in an upcoming print edition of *CMAJ*, is posted in open-access format and freely available at insert [www.cmaj.ca/site/misc/caring-f ... ly-cmaj.151422.xhtml](http://www.cmaj.ca/site/misc/caring-f...ly-cmaj.151422.xhtml)

Additional refugee health articles, previously published guidelines and other resources are available at www.cmaj.ca/site/misc/refugee-health.xhtml

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