

FEATURE

CHRISTMAS 2017: ALL CREATURES GREAT AND SMALL

Does *Peppa Pig* encourage inappropriate use of primary care resources?

As a general practitioner, I have often wondered why some patients immediately attempt to consult their GP about minor ailments of short duration. As the mother of a toddler and frequent witness to the children's television series *Peppa Pig*, I might have discovered the answer.

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Peppa Pig centres around a young pig, Peppa, her family (brother George, Mummy Pig, Daddy Pig), and animal friends and members of the community.

Dr Brown Bear, a single handed GP with whom the Pig family is registered, appears to provide his patients with an excellent service—prompt and direct telephone access, continuity of care, extended hours, and a low threshold for home visits. But could this depiction of general practice be contributing to unrealistic expectations of primary care? In this article, I present three case studies and consider the potential impact Dr Brown Bear's actions could have on patient behaviour.

Case study 1: *Not very well*

A 3 year old piglet develops an erythematous maculopapular facial rash. Her parents call Dr Brown Bear, who operates a "doctor first" telephone triage system. Dr Brown Bear advises putting the patient to bed and opts to make an urgent home visit. He examines the patient's tongue, diagnoses a "rash," and reassures the parents it is "nothing serious." He offers a dose of medicine, despite admitting this is purely in response to the patient's request, and says the rash is likely to clear up quickly regardless.

Case study 2: *George catches a cold*

Parents call Dr Brown Bear on a Saturday regarding an 18 month old piglet with a 2 minute history of coryzal symptoms after playing outside without his rain hat.

Dr Brown Bear telephone triages and makes an urgent home visit.

After examining the throat, he diagnoses an upper respiratory tract infection and advises bed rest and warm milk. Symptoms resolve within 12 hours.

Case study 3: *Pedro's cough*

A 3 year old pony coughs three times while attending playgroup. The nursery teacher immediately calls Dr Brown Bear, who telephone triages and makes an urgent visit to the playgroup. In a green light car. With sirens.

Dr Brown Bear takes a focused history, asking if it is "a tickly cough or a chesty cough?" and inquires about duration of symptoms. He does not commit aloud to a diagnosis, but administers a dose of medicine immediately and warns that the cough is potentially transmissible.

The rest of the playgroup attendees and their parents become symptomatic, and all are given a dose of an unspecified pink medicine.

Dr Brown Bear also quickly becomes symptomatic. His patients attend the surgery to administer his dose of medicine, and to sing to him.

Discussion

Given that *Peppa Pig* is broadcast and encountered by parents in more than 180 countries worldwide, the influence of his portrayal of the work of primary care physicians is likely to be significant.

Case 1 questions whether Dr Brown Bear is an unscrupulous private practitioner, rather than an NHS GP.¹ In this case of a probable viral rash, he could reasonably have encouraged self management (with appropriate safety netting) or asked the family to attend surgery for assessment. His decision not to suggest a potential financial incentive for conducting an arguably clinically inappropriate home visit.

Case 1 is also an example of unnecessary prescribing for a viral illness, and encourages patients to attempt to access their GP inappropriately. Depending on interpretation of the medicine,

Dr Brown Bear is either prescribing antibiotics in an era of rising antibiotic resistance, or is issuing on prescription medication (paracetamol?) that is available over the counter. In the context of the UK's NHS, this creates a potential drain on resources.

In **Case 2**, Dr Brown Bear conducts a telephone triage outside normal working hours and again opts to make a clinically inappropriate urgent home visit. Had he explored Daddy Pig's ideas, concerns, and expectations, he would have discovered that Daddy Pig already had a good understanding of the likely diagnosis and self limiting nature of the illness. However, Dr Brown Bear's management was at least clinically appropriate on this occasion, and his advice might encourage the family to self manage similar illnesses in future.

By **Case 3**, Dr Brown Bear displays signs of "burnout." His disregard for confidentiality, parental consent, record keeping, and his self prescribing indicate that the burden of demand from his patient population is affecting his health. He is no longer able to offer the level of service his patients have come to expect.²

Conclusion

Peppa Pig conveys many positive public health messages, encouraging healthy eating, exercise, and road safety.³ However, from (repeated, mostly involuntary) review of the subject material, I hypothesise that exposure to *Peppa Pig* and its portrayal of general practice raises patient expectation and encourages inappropriate use of primary care services. Further study is needed to confirm this.⁴

Dr Brown Bear was approached for his perspective on the cases discussed; however, he is unable to comment pending the outcome of a fitness to practise investigation.

Conflicts of interest: None declared. It may look like my child is sponsored by *Peppa Pig*, but any claims to this effect are false.

Provenance and peer review: Not commissioned; not externally peer reviewed.

¹ Despite being a UK resident with access to the NHS, it is possible that Daddy Pig holds private health insurance through his employer—readers well versed in *Peppa Pig* will be aware he works as a structural engineer, whereas Mummy Pig writes nonsense letters on her computer from home for no obvious reason. They both, however, appear to be regularly available to drop off and collect their children from playgroup without any additional childcare. Further study is needed to ascertain how this is achieved.

² Another contributing factor to Dr Brown Bear's exhaustion is likely to be that he also provides medical cover for a community rehabilitation ward (Series 3: *Hospital*).

³ To quote Mr Potato in *Fruit*, Series 4: "Apple, orange, banana, pear, and pineapple too; Eat five pieces of fruit a day, because they're good for you!"

⁴ Recruitment of a cohort of control patients without prior exposure to the subject material has proved difficult.

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