



CBC News

This is a shocking example of diagnostic overshadowing that happened not long ago in a Toronto hospital. David Pontone made to leave Toronto hospital on his knees.

<https://youtu.be/snvR3SNJMys>

Diagnostic overshadowing is the attribution of a person's symptoms to a psychiatric problem when such symptoms actually suggest a [comorbid](#) condition.^[1] Diagnostic overshadowing occurs when a healthcare professional assumes that a patient's complaint is due to their disability or coexisting mental health condition rather than fully exploring the cause of the patient's symptoms. Often, once a patient has a confirmed diagnosis, there is a tendency to attribute all new behaviors or symptoms to the original diagnosis.^[2] Diagnostic overshadowing increases the risk of further health complications and delay in accurate treatment.^[3] An example of diagnostic overshadowing may be a patient being diagnosed with a psychiatric problem and prescribed medication due to head banging behavior, but the patient actually has communication challenges and can't express pain in their mouth due to a dental abscess.

History

The term was first used to describe the underdiagnosis of [mental illness](#) in people with [intellectual](#) or [developmental disabilities](#).^[1] In recent years, the term has also been used when physical illnesses are overlooked in people with mental illness.^[4]

Causes

Diagnostic overshadowing can occur for several reasons. Diagnostic shadowing most often occurs when a new behavior develops or previous abnormal behaviors increase.^[5] Staff inexperienced with working with people with intellectual disability are also more likely to mistakenly attribute symptoms of a physical illness to a person's intellectual disability.^[6] Time pressures of healthcare providers and stigma have been found to be additional causes of diagnostic overshadowing.^[7]

Impact



Play video introduction to Mental Health Commission of Canada

"How We Can Dismantle Mental Health- and Substance Use-Related Structural Stigma in Health Care"

<https://youtu.be/6R9abpPsGyA>



Play video "Access Denied"

<https://youtu.be/kJrNQrhU8oo>



There was this campaign about Bell Let's Talk that I participated in.

"Dismantling structural stigma in mental health care" - Mental Health Commission of Canada

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Play video "Less Than"

<https://youtu.be/y6yiiLTtHK4>



"Dismantling structural stigma in mental health care" - Mental Health Commission of Canada

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Play video "A Way Forward"

<https://youtu.be/p1BhN1BNrMw>



<https://subjectmatter.ca/work/beyond-stigma/>

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This is a video shown as part of this MHCC e-learning course. It is presented with a detailed Facilitator Discussion Guide intended to support individual self-reflection or group discussions for healthcare organizations - for example, during team meetings or “lunch and learn” training sessions or integrated in to new staff/management orientation.

This facilitator guide from Subject Matter Health Research Lab is funded by Health Canada. It is just one of the many resources you will encounter while taking the MHCC e-learning course. It is also provided in our Peer Work Network resource list.

Stigma impacts all aspects of treatment for people living with opioid use disorder. This animated video explores these impacts and how we can work together to move beyond stigma.

<https://subjectmatter.ca/work/beyond-stigma/>

<https://youtu.be/bdHd-BQI7JQ>