

Session Three

Video: old Fashioned
medicine

Themes:

1. Professional etiquette
between medical
practitioners
2. Preventive/box-ticking
medicine vs. "old fashioned"
symptom-driven medicine
3. Bullying in the workplace
4. Patients who kid themselves
about their weight (or other
areas of health)
5. Why are appetites so
difficult to control? Why
do we do things when we
know they're bad for us?
6. "I don't want to get old
and die" as against "Are
you going to enjoy your life
while you've got it?"

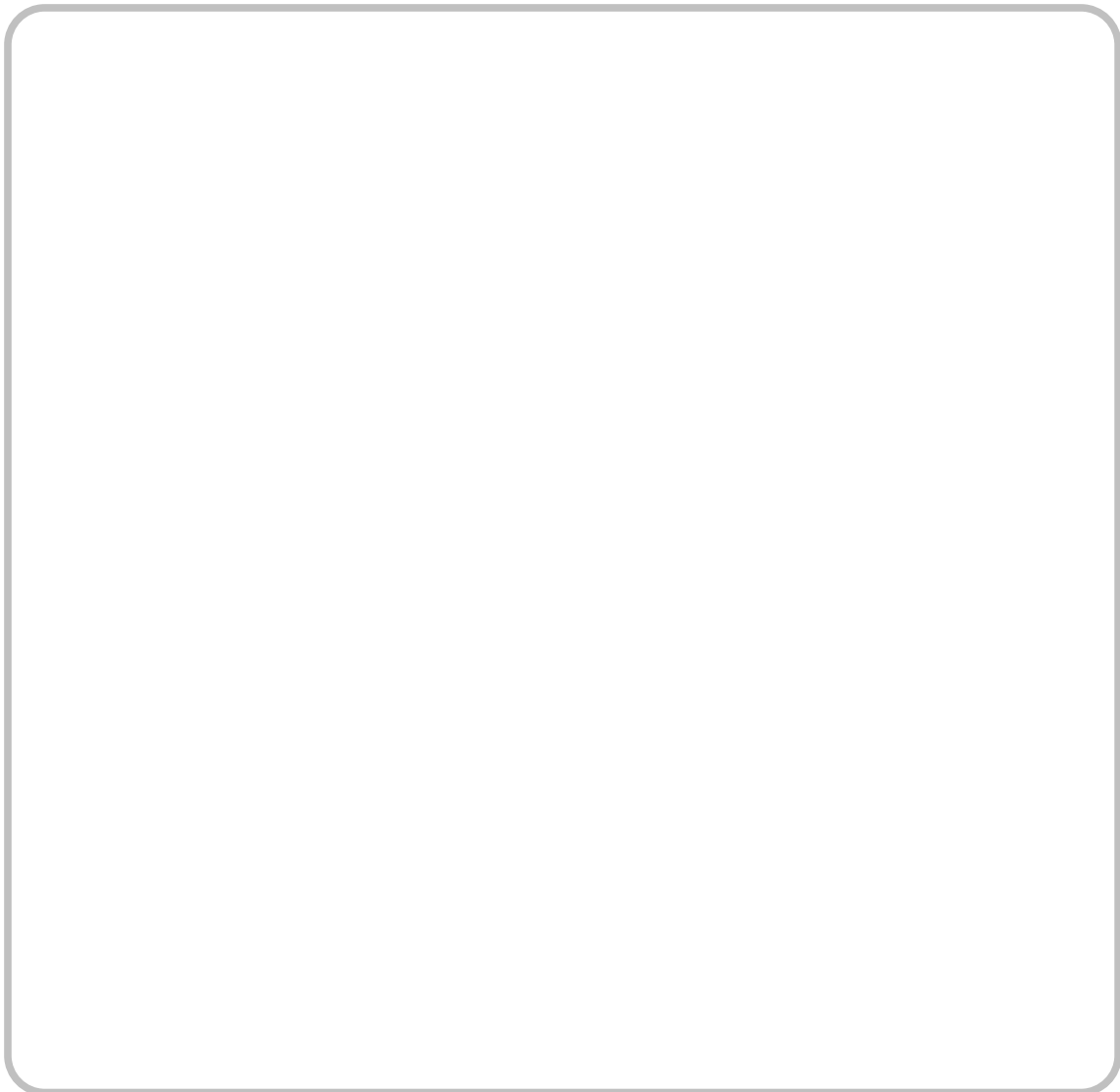
Questions:

Dr Hairy has given Mr Fapso advice about trying to lose weight and take more exercise. When Mr Fapso reports back he is seen by Dr Gladstone, who tells him something completely different.

What are the professional ethics of this situation? Have you ever had your advice to a patient contradicted by another doctor?

Think of an example where you have taken over the care of a patient from a colleague, and felt that the colleague was handling the case differently from the way you would prefer. What did you do? How did the patient react? How did the colleague react when he/she found out, or didn't that happen?

If the general rule is not to contradict what your colleagues have said, what are the circumstances in which this rule needs to be broken?

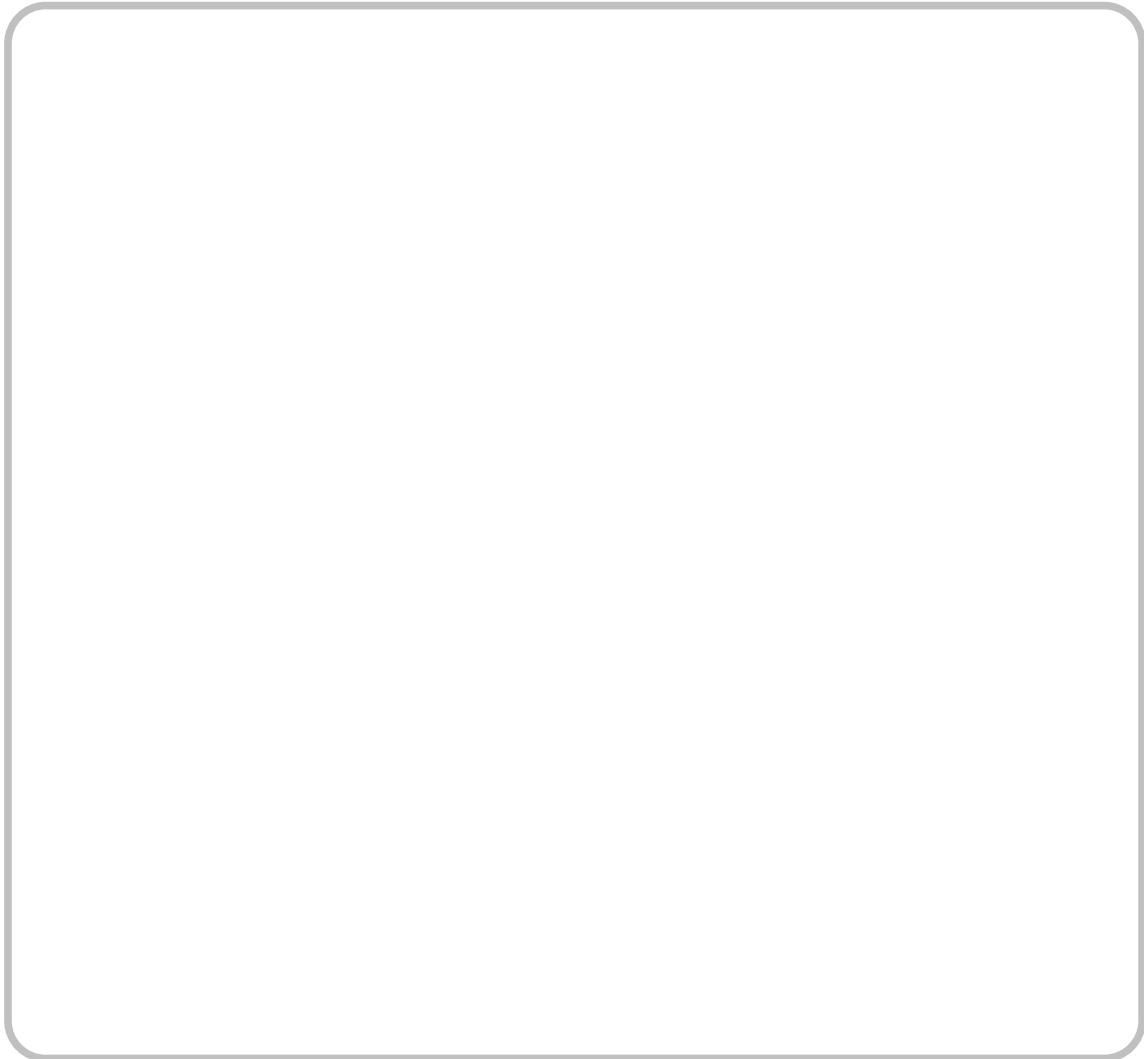


Dr Gladstone is an “old fashioned” GP who thinks patients should come and see him when they've actually got something wrong with them, and regards preventive medicine as a waste of time. He doesn't like the “box-ticking” approach because it diminishes his autonomy as a practitioner and erodes the individuality of the patient.

Where do you stand on this issue? How do you feel about the QOF points system and its effects?

Is this a generational thing – are all doctors over the age of sixty suspicious of preventive medicine and “box-ticking”, whereas doctors under the age of forty take it for granted as part of modern general practice? Can you think of any examples which contradict this cliché?

Dr Gladstone prides himself in knowing the patients personally. Do you think the trend in general practice is away from personal relationships with the patients, and towards a more methodical, impersonal approach – and is this a good thing or a bad thing?



Mr Fapso is very evasive and defensive about his own weight – and in fact he has managed to completely kid himself that he can't be overweight, when it's obvious to Dr Hairy that he really is.

What's the most bizarre excuse you've ever heard from a patient for their apparent weight gain? (Eg. "It's really my jumper", "I absorb fat from the atmosphere because I work in a chip shop", "I've got heavy bones"...) How did you deal with it?



Dr Gladstone is even fatter than Mr Fapso – but at least he doesn't try to adopt a "holier-than-thou" attitude about his weight. You probably know of GPs who are overweight, drinkers, smokers, drug-takers, murderers, etc. How do these GPs handle the task of telling their patients to lose weight, cut down on the booze, lay off the fags, etc.? Do their own weaknesses put them at an obvious disadvantage, or do they somehow manage to make them count in their favour?



When Dr Hairy was a Registrar he was evidently bullied and taken advantage of by Dr Gladstone.

Have you come across any examples of senior GPs bullying and/or exploiting their junior colleagues in this way?

Sometimes even senior Receptionists, Admin staff or Practice Nurses can intimidate junior doctors – have you come across examples of this?



On the other hand, working with colleagues from different generations can sometimes be a very positive experience. Can you think of an example of something you have learnt from a considerably older or considerably younger colleague, which has really helped you in your work? Do you think that being older or being younger gave the colleague a different perspective from your own?



Answer one of the following:

- If you haven't weighed yourself for more than a year, do so. You don't have to specify the results, but write an account of the reasons why you weren't weighing yourself, and your feelings about stepping onto the scales.
- Which would you rather do, live a long but dull and frustrating life, or live a short but very fulfilled one? If possible, give examples of people whose lives fit one or the other of those descriptions.

