

Pulling yourself together

Last week I made a house call in one of our older suburbs called Boughton. It is on the outskirts of town and straddles the road that meanders up to Sweetwaters. I always feel that I am going back in time when I visit the area, as it is very quiet and the houses are fairly old and must have been built around the time of the Second World War. The shrubs and trees in the area are all slightly overgrown, dogs are lying asleep in the sun on verandahs and you can hear the clipping of the gardener at the back.

The patient was 94 years old and was looked after by her daughter and granddaughter and they were worried because she had been sleeping for three days and had not moved in bed and was not eating or drinking. This is a fairly common setting for a house call in general practice.

The screen play, as far as I can remember it, went something like this:

Daughter: "Here's the doctor to see you, mother."

On this announcement one eye slowly opened to survey the doctor standing by the bed.

Me: "And how are you today?"

Patient: "Oh, I am very well, thank you, doctor."

Me: "And how are you doing?"

Patient: "Oh, very well, thank you, doctor."

Me: "And what is your appetite like?"

Patient: "No, doctor it is very good."

Me: "So what is your favourite food to eat?"

Patient: "Oh, doctor, I eat everything."

Me: "It is really important that you move around and sit out of bed."

Patient: "Oh, yes, doctor, I move all the time."

The gears on her thought processes were almost audible as she contemplated the right answers I wanted to hear. Otherwise she was going to land up in the nursing home or hospital. Grandma still had all her survival faculties when the chips were down.

The conversation went on in the same vein and when we had finished the granddaughter said that that was the most she had

heard her grandmother speak in at least a year. She had "pulled herself together" at the sight of the doctor in her home and beside her bed.

I also do this with my GP when I go on my rare visits. I believe that over a certain age one should have a screening colonoscopy but my enthusiasm to have a silver rocket pushed up my bottom is not a high priority in my social life.

The screen play goes something like this:

My GP: "Chris, have you booked for the colonoscopy yet?"

Me: "Not yet, but I have the surgeon's office number to make the booking."

My GP: "Would you like me to make the booking for you?"

Me: "No, no, that's alright. I can do it myself as my dates are complicated."

We both know the code that I am speaking in and the defensive strokes off the back foot that I am playing back to the bowler.

I find that my male patients are even better than the ladies at playing defensive strokes. The screen play goes:

Me: "And what can I do for you today?"

Patient: "No, I'm fine. It was really the wife who sent me in."

Me: "So what is the problem?"

Patient: "No, really Doc, I think I need a check-up."

It is only later that the wife asks me if he told me about... And there follows a whole string of symptoms from memory loss to bladder problems that have not been mentioned.

So I am now going to put up a notice in the waiting room:

"Ladies, don't send your husbands in on their own. They pull themselves together and deny everything."

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