## As others see us....

Take your friendly family physician, for example. A thorough scientific training has taught him the pitfalls of treating the symptoms while ignoring the cause. Wisdom accumulated during a lifetime of judicious experimentation has made him wary of hasty diagnoses, and premature treatments. Impatient patients will try to tempt him out of his cautious 'wait and see' attitude. With the inexorable strength of the man who knows he is right, he will administer the tests that will discover the germs that will dictate the treatment for the disease that Jack has. A simple relapse will set the same process in motion once again.

Of course, as he will no doubt have told you on countless occasions. 'The best treatment is often no treatment at all' with that perceptive twinkle in his eye. So the child who you think has 'colic' is suffering from justifiable weltschmertz which a cuddle will do more to assauge than a tranguilliser. Talking of tranquillisers, YOU should never take them at all, though it will be more than apparent to him that the origins of both your headache and your asthma are neurotic. They will both provoke a benign 'Why don't you relax/take a break/take it easy?' response, and the patient suffering from them may under exceptional circumstances evade the traditional test, germ and treatment routine.

If he has the time, he may lecture you on the correct way to live in order to avoid disease altogether. This involves abstinence from all pleasurable activities (like too much sex and any alcohol whatsoever) and the frequent experience of pain (as in colder baths and jogging). The foods to be eaten to fuel this healthy life sound like an advertisement for your average boarding school or one of those sadistic health farms, depending on the vintage of your family doctor. It sounds marvellous, and you feel a tiny bit sceptical. Does he really believe all these things, or does even he have the odd doubt now and then?

It is usually fairly simple to ascertain whether his recipe for the healthy life has found a complete acceptance in his eyes. Is your G.P. a fine figure of a man, with a full head of hair, a marked absence of paunch, glowing rosy skin and a general flavour of the vast outdoors?

They all ARE, aren't they? Fine products of their preventative techniques. You never see your doctor in your favourite French restaurant, hogging red meat in cream, holding aloft something less innocuous than apple juice in the one hand while he quashes his radio with the other.

True, the negative publicity that has hounded the smoking doctor has led most of these gentlemen to give vent him feel better, that's all.

to their addiction in the loo, if ever, but a fair proportion of doctors simply don't practise what they preach . . .

Which leads one to the unspeakable, the unthinkable: what if they don't even believe in the tried and tested wait and see technique? When their own child has a sore throat, do they wait and see it becoming pneumonia before they treat it? If they get a cramp in their stomachs, do they wait and see whether their Christmas break does the trick? When their girlfriend complains of her usual itch, do they wait for the test to register positive before they agree to prescribe once more the cream they've been prescribing for a decade? Let's just wait and see ...

## Enter the family doctor with the doctor's family

He has just written an erudite article on the careful selection of the appropriate antibiotic. He didn't include it in his text, but in the case of his wife's bronchitis, this took the form of hunting round for any sample recently donated by a rep.

He is pretty tired — like most modern men, he works while he should be eating muesli and jogging — so he takes a shot or two of Scotch to pick him up. Look, he knows that it is a depressant, but in his particular case, for some unknown reason, it makes him feel better, that's all.







His wife is not breastfeeding their baby. They know she should have, but her milk dried up. Of course, he understands that this does not happen among primitives, and that a bit of stimulation via sucking usually does the trick - after all, he tells all his patients to persevere, but in her special case, it seemed better for the child to go onto the bottle. He felt that diluted cow's milk might have been the answer, but the rep that gave him the antibiotic gave him some tins of powder, so they tried that. Of course, the kid was allergic to the powder (every one knows that doctor's kids are allergic to almost anything - you don't even have to test them) so they are feeding him a mixture made of

beans. It gives him cramps, but there's nothing a little pink mixture won't cure, so they administer a few drops before each feed.

The baby is a particularly bright and difficult one (wouldn't he be?) so the wife is also pretty strung out. The little yellow pills that have come in for such a knocking in the literature will be just the thing, and he hands her a half-finished pack, 'remind me to give you more when you need'. She takes a mild sleeping pill occasionally but he seldom has to resort to them, being more than tired enough to take pep pills, which he sometimes does.

When his mother-in-law goes on holiday, she takes along some of the samples as a precautionary measure. It is an astonishing fact that, when their families are involved, doctors seldom, if ever, trust the wait and see attitude of a distant colleague, preferring to prescribe over the telephone, something he would never visit on a REAL patient.

The phone rings, It's his sister. Noone knows what she's asking, but we can all hear his reply: What did I give you last time? Have you got any left? Well, try it and see — it probably won't do any harm.' He must be talking about floorpolish. No doctor would talk like that about a prescribed drug.

In response to his wife's quizzical look as he winces, he mumbles stoically: 'No, I'm fine really — it must be some sub-clinical thingummy'. You learn from watching doctors in their natural habitats that the friendly family physician is a notable hypochondriac. If there is absolutely nothing wrong with him, he will never admit to it without some qualification. He will usually carry around with him a bottle of strong painkillers for just this kind of emergency.

The injunction: 'Physician, heal thyself has been followed with great zeal by doctors. This is apparent when one considers how many of their number are addicted to one form of medication or another.

But the dual standards under which they operate could have positive advantages. When you become tired of the wait and see treatment, and long for some good, old fashioned symptomatic relief, you can either marry a doctor or see that one of your offspring becomes one as soon as possible.

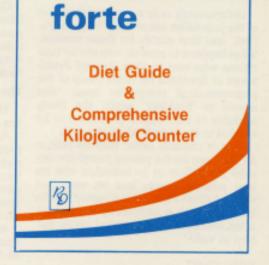
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