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# DIALOGUE

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## “Primary Health Care: what does it actually mean?” – Roy Jobson

(A fantasy allegory taking place within the family practice consultation, sometime in the future.)

- Doctor: Good morning, Mrs Smith. How nice to see you again. How have you been keeping?
- Mrs Smith: Oh, I'm feeling a bit run down at the moment, so I thought I'd better come and get a top-up of some more *secondary* health!
- Doctor: Well, certainly, Mrs Smith. But can't I rather offer you some *primary* health? I could throw in some *prevention* and perhaps a little *health promotion* if you like – they are on a “special” this month.
- Mrs Smith: Oh, I don't know. I went to get some *tertiary* health last month – and *they* had a special on *secondary* prevention. I had some of that, and really, I can't say that I've noticed any difference.
- Doctor: (sotto voce) I really think you need to be careful about these doctors who claim to offer tertiary health *and* secondary prevention. The *only* answer is to give more and more people *primary* health.
- Mrs Smith: Do you mean *any* people?
- Doctor: *All* people! It is the *only* path we can take to make the whole world healthy. (Enthusiastically) Health for all by the year 3000!
- Mrs Smith: But that sounds so plebeian! Surely there must be an upper-class type of primary health!
- Doctor: Exactly! You see, when you come to see me *privately* as a doctor you're getting upper-class primary health. If you see me under a national health system or through medical insurance, you'd be getting middle-class primary health and if you were to see me under a community health-scheme, you'd be getting lower-class primary health. It's quite simple really – once you understand it.
- Mrs Smith: I don't understand it at all! You've never even *offered* me any national health, or for that matter any community health. *They* sound as if they might just help me!
- Doctor: My dear, *you* are an upper-class primary health sufferer. National health and community health would be totally inappropriate for your needs. I'm afraid that I cannot even consider offering them to you! Now let's get on with the job! You said that you needed some more *secondary* health and I thought that I should rather give you *primary* health with a little *primary prevention* and a touch of health *promotion* as a bonus. Alright?
- Mrs Smith: But what does that actually mean?
- Doctor: It means that I am *actually* giving you primary care!
- Mrs Smith: What is the difference between primary health and primary care?
- Doctor: Mrs Smith, please don't obscure the issues. You're obviously confused! *Everybody* knows what primary care is.
- Mrs Smith: Well I don't, and I'd like you to please explain it to me!
- Doctor: A lot of people define it as *essential* care ...
- Mrs Smith: Oh yes – I understand *that*! It is *absolutely essential* that I have a *massage* once a week, a *manicure* once a month and a *mammogram* once a year!
- Doctor: I don't think that that was quite what they meant. *Other* people consider primary care to be concerned only with *minor complaints* and *trivial problems* ...
- Mrs Smith: (horrified) Well thank *goodness* I've never had any of those.
- Doctor: (with resignation) I can vouch for that!

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## ... Primary Health Care

Mrs Smith: So what do *you* think primary care is, doctor?

Doctor: Well I belong to that group who consider primary care to be first contact care...

Mrs Smith: Oh but *you* weren't my first doctor - you were only the third - so *that's* not primary care.

Doctor: Oh yes - I remember you used to go to Dr Suave down the road. (Hopefully) Perhaps he could explain properly...

Mrs Smith: I will never go back to that doctor!

Doctor: Why not?

Mrs Smith: I found out that he's a member of the KGP!

Doctor: The *what*?

Mrs Smith: (acting out) Why "*doll*"... you don't know the KGP - that's terrible! It stands for "Kugel's GP".

Doctor: (Charlie Brownish) Oh, good grief!

Mrs Smith: At least you don't have a nickname like his...

Doctor: Nickname?!

Mrs Smith: Oh yes. They give all their doctors nicknames. (Coyly) Shall I tell you what his is? ... It's "Nocturnal Omission"!

Doctor: (taken aback) What?!

Mrs Smith: "Nocturnal Omission" - you see he never comes out at night!

Doctor: (more Charlie Brownish) Oh, good grief! (Pause) Maybe you'll understand when I say that Primary Care makes health care "accessible" to everyone.

Mrs Smith: But that's impossible! Not everyone has a computer!

Doctor: (surprised) A computer?

Mrs Smith: Well how else can you "access" anything without a computer? I must say I rather fancy the idea of being able to access *you* on my computer. Do you suppose you could...

Doctor: (interrupting - in a *patient-centred* way!) You were saying that you needed a top-up of *secondary* health, Mrs Smith. Would you like to tell me just what you were expecting me to do for you?

Mrs Smith: (rebuffed) What I *really* want is for you to give me my *vitamin* pills, and a referral to a plastic surgeon to have my nose fixed - I just know that *that* will sort out *all* of my problems!

*(Inspired by a discussion in Primary Care by the 1990 second year M Fam Med Students of the dept of Family Health, University of the Witwatersrand)*