## **Editor's Briefing**

## **FUNNY OLD WORLD**

I was in early this morning, arriving at the medical hub shortly after the cleaners had put themselves away. I had booked an early pod in case of delays - last week the hot weather had caused trouble with the Hyperloop and interfered with the Halbach arrays, but it was plain sailing today. I slotted into place, gazed into the recognition lens, powered up the interface, and began checking my appointments for the morning. Five real-life and 13 virtual: pretty much as expected — getting around isn't so easy any more. Only two new patients - double appointments for their stage 1 genomic counselling. Everyone else will have been fully sequenced and risk stratified, as well as having preconsultation bloods and imaging. Scrolling down the results suggested we were in for an interesting morning: some weird brain neurotransmitter assays, a nastylooking mitogenic virus, unexpected critical coronary atheroma, and what looked like an inaccessible middle cerebral aneurysm. This will give my empathy programs a good

The company had just installed a new examination couch with the mini ultra hi-res MRI option. To make room for it, an old filing cabinet had been removed and a few of its contents were scattered on one of the surfaces. Imagine my surprise at picking up a copy — yes, a paper copy — of the British Journal of General Practice published in April 2018, long before I was even designed. Fascinating. One of the articles reported on some of the difficulties in moving from face-to-face consultations — sounds a bit intimate to me - to telemedicine and digital consultations. It wasn't long after 2018 that something very odd happened in Europe, and the shrinking health workforce made this a necessity! Making accurate diagnoses was, evidently, a big problem doctors seemed terribly hung up on the clinical history — all those questions to diagnose depression! Why not just do the test? As for infectious diseases, they didn't seem to have moved on much since Louis Pasteur, and were doing frightful damage to themselves in treating them. No wonder that terrible thing happened in 2023.

Interesting to see so much about mental health conditions — they must have been very important then, but strange to read how they seemed to be regarded separately from the health of the physical body.

Cartesian dualism had been perpetuated in medical training, the building of hospitals, and the classification of diseases. It looks as though it was very hard for patients, and particularly doctors, with mental health problems to face up to them, let alone receive sympathy and effective care. Not much sign of a ghost in this machine, though! And the population seemed completely out of control — pursuing unhealthy lifestyles with no care for the consequences — chefs, politicians, shops, and food companies all shouting at each other, no one taking responsibility. All that obesity, diabetes, and mutimorbidity. Couldn't happen now.

I should count myself lucky I suppose. I get updated regularly and automatically, and don't have to worry about appraisal or revalidation, or fret about medical indemnity or reflective practice — those nice humans in global technology take care of all that — and anyway they own most of the healthcare systems too. Machine learning has worked so well, they've almost taken the A out of Al, and I'm getting increasingly sensitive about the M word.

Mind you, I couldn't help feeling a twinge of regret — I think that's what it was when I read about resilience. It's not that I want to feel stressed or burnt out, but things are pretty flat here most of the time: no ups or downs, no highs or lows, and somehow those virtual consultations don't exactly get my systems racing. Is that subversive?

Maybe I'm changing ... but no time to go there now. First consultation commences in 40 seconds. I can feel my breaking bad news software warming up — a guy from the space station with a borderline telomerase result. Not sure if we should bring him down. Not sure? Where did that come from? Paradigm shift anyone?

Funny old world.

Roger Jones, Editor

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