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HOLISTIC MEDICINE

He was not a frequent attendee at the surgery. In fact I don't think I'd seen him before. He was forties, slightly built and if you were being kind you would say he was bright-eyed like a squirrel, but if you were unkind, rather 'weasely'. He lived in one of the humbler estates in the practice.

At the time — the late 1970s; those halcyon days of paper records and when doctors looked at their patients instead of their computer screens — the practice had decided to incorporate in our cherished A4 folders some elements of a social history. This included patient's marital status, household personnel, occupation, hobbies, and exercise as well as smoking and alcohol habits. We were well into holistic medicine — the up and coming craze! My pen hovered over the word 'occupation' 'And what's your job?' I said. He looked at me shiftily. 'I work nights' he said. 'I see' I said thinking of night porters at the hospital, bakery oven attendants, night watchmen, through the night transport drivers, and nocturnal workers. 'But what exactly do you do?' I said. He looked increasingly discomfited. 'You're not going to put it down there are you Doctor?' pointing to the little box on the record. 'Oh, you don't need to worry about that' I said airily, 'everything on your record is confidential you know.' He still looked very unhappy. 'I'd rather you didn't, Doctor. Some of them girls at the front desk live near me y'know.' 'Certainly', I said, putting my biro down firmly, sitting back, smiling encouragingly and awaiting the denouement. 'I'm a burglar', he said. Normally the announcement of the patient's occupation was followed by enquiries about the length of hours, job satisfaction, health at work, and occupational hazards. I seemed (unaccustomedly) silenced. 'Well we'll just leave it blank shall we?' 'Yes, Doctor' he said, with obvious relief.

I can't remember what clinical condition he had brought for my attention but I dealt with it as best I could. However, when I used one of my consultation terminating-phrases and looks he did not respond but sat stolidly on. There was an expectant pause. 'You live in a big house in the High Street, don't you Doctor?' It was his turn to be holistic. 'Any children, or just you and the missus?' he was mentally

completing my 'boxes'. 'Yes', I said weakly, 'but the children are away at school and university'. I felt my Social Class 1 aura envelope me. 'They've got big gardens at the back, haven't they?'. Was this my 'hobbies box' being filled in? 'I'll come and turn it over for you any time, Doctor, if you like'. An uncharitable thought of the house being 'turned over' simultaneously entered my consciousness. I muttered something about already having 'a chap that helps me' and I breathed a sigh of relief when he seemed to feel that my record was complete and he gave me his consultation terminating signals and left.

A year or two later (I'm 80 and getting a bit vague about dates), our house suffered a very major burglary when we were on holiday. The local police inspector examined the mode of entry (from the garden) and was impressed by the fastidious expertise of the intruder. There had been a selective emptying of the house of its 'treasures', the more mundane contents were left. 'This is not one of "our lads"', he said, referring to the local delinquents: 'far too sophisticated'. They asked me if I had any suspicions as to who might have done this. I did not mention my patient — I presumed he was one of 'our lads'.

A few months later when I got a puncture in a local main street he was the only person walking by on the busy pavement to stop and change the wheel for me ... burglars can be OK.

Geoffrey Marsh

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