Editor's Briefing

PATIENT POWER

William Osler famously instructed his students to listen to their patients, because in doing so they would learn the diagnosis. This issue of the *BJGP* is about listening to patients, but it deals with much more than simply taking a good history. In editorials, research papers and discussion articles, we explore the critical relationship between doctors and patients in a variety of settings, including providing feedback on blood pressure monitoring, trying to get an appointment at the surgery, working in patient participation groups (PPGs), ensuring respect and equality in the consultation, and reclaiming a sense of self.

The underlying sense from all these articles is that things aren't working all that well. In her editorial Patricia Wilkie reminds us of the statutory place that PPGs are supposed to occupy in general practice, but frequently do not — many practices don't have a PPG or, if they have, it does not function particularly well. Wilkie also reminds us of how much an effective and vigorous PPG can achieve, not just for patients, but for the practice. Many of the tasks that GPs can find frustrating and difficult, often because they are not properly trained to do them, such as encouraging lifestyle change, promoting exercise and providing information and support to people with long-term medical conditions, can be tackled in a PPG.

Listening to patients outside the consultation through feedback is a priority. Mary Carter and her colleagues reflect on the frequently-identified gap between feedback and improving service delivery, and suggest that obtaining and acting on real-time feedback in general practice might be a solution. It appears that in practices with good internal communications and a sympathetic orientation towards patients' views this can work well, but these conditions are often not met, and feedback can fall on deaf ears.

Listening to patients inside the consultation is even more important. Charlotte Williamson discusses empowerment of patients and the need to re-balance the power relationships between doctors and patients. She proposes a number of basic, practical and achievable actions that any practice and any individual GP can take to move in this direction. Her comments on the symbolic meanings of the practice environment and routines are particularly

telling. The importance of a sense of self, for both patients and physicians, is the focus of the article by Chris Dowrick and colleagues, who recognise the danger that, at this time of organisational change and workforce crisis in primary care, the essential components of personal care are in danger of being further eroded, and propose a new 'manifesto' for patients and doctors in general practice.

A number of commentators have said that if general practice fails, the NHS fails. This is almost certainly true, but it isn't just the structure and staffing of general practice that needs to be maintained, but the essence of personal, comprehensive and coordinated care that we need to retain as well, to keep alive that 'spark of magic' that takes place in almost every consultation. It seems to me that our relationships with our patients are absolutely central to this. Working in partnership with patients, rather than having adversarial relations with them, is crucial not only to the effective management of illness and the use of healthcare resources, but also to maintaining our own mental and professional wellbeing. Three books reviewed in *Out of Hours* touch on these topics in different ways. Mikhail Bulgakov's short stories from remote north-west Russia, in *A Country Doctor's Notebook*, *Mapping Uncertainty in Medicine* by Danczak, Lea, and Murphy, and Graham Easton's highly engaging account of 18 patients seen in a morning surgery, in *The Appointment*, are all sources of wisdom and inspiration, and remind me of my one major regret about being a GP, which was that I didn't keep a diary.

Attitudes to patients may be shaped early on in medical careers, so that medical students need to understand the importance of building respectful relationships with patients and avoiding their casual denigration. High-quality student placements in general practice during the undergraduate years have been identified as a key factor in students' career choices, and provide the ideal setting to demonstrate these core values.

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DOI: 10.3399/bjgp16X687601

© British Journal of General Practice 2016; 66: 545–592.

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2015 impact factor: 2.741

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ISSN 0960-1643 (Print)
ISSN 1478-5242 (Online)