Out of Hours

Bad Medicine

"We also need to consider the active promotion of advance directives at the very least, while, at the very most, the medical profession should stop blocking the assisted dying agenda."

The young ones

It was my 50th birthday recently. I have a large family, and like most large families we grew up pretty poor: shared rooms, wearing hand-me-downs, a shared sock and pants drawer, and two toothbrushes between the eight of us. When I went to university our student flat made the TV show The Young Ones look like a public information film on healthy living. We indulged in wildly irresponsible behaviours: skipping classes, having hangovers in tutorials, smoking on buses, drawing noise complaints from neighbours, making home brew, moving street signs and traffic cones into the flat, eating at chippies, eating pies, gratuitously swearing, running on train tracks, walking on high walls, listening to the Smiths, the Clash, and the Poques, visiting cold launderettes, and our clothes thrown in heaps. But the decades pass. Our only reunions are now the odd birthday or wedding. There, we tease a now senior and well-respected professional about the time they smashed up the union toilets.

So, at my birthday a friend spoke - no mean feat as he could barely stand! Knowing of my writing history, he suggested a few self-help books I might consider penning, Obesity, is it Really a Problem?, Are You Drinking Enough?, and Smoke Yourself Fit. Laughter. Then dancing ensued. These rare events creating 48 hours of vivid blurring memories in a life of sober responsibility. A few moments recapturing the spirit of our youth. So, what is the point of this crass, un-PC, laddish monologue?

Age changes you; you see life differently. You find yourself caring less and caring more in equal measure. We reflect that we have spent our lives seeking the things that don't matter, while neglecting the things that do. Wealth and status seem the zenith of disappointment. With health, you accept you are going to die and that you may become ill. Yet the young naturally have little interest in the old and no insight into what it means to be old.

The problem is that medicine is run by, and has values set by, the young. And this is a problem for the old, who increasingly lose their public voice as they age. So much NHS resource is tied up in over-treating and over-investigating old and frail patients. Doctors thoughtlessly and systematically take away the dignity of older people and peddle false hope, for medicine can't save us from the inevitable. The general public overwhelmingly support assisted dying yet the profession is too weak to acknowledge and address suffering caused by loss of independence. Likewise, health economists attempt to drill down and measure life, expressing it in the form of a qualityadjusted life year or QALY. This measure is so crude as to be largely meaningless, yet this is used to apportion health resources.

We have a current crisis in social care because so many resources are being wasted in hospitals — resources better used supporting people in their own homes. Home care is what older people need and want. There's a need for a national debate on the funding of social care and, importantly, the need to integrate social and health care. We also need to consider the active promotion of advance directives at the very least, while, at the very most, the medical profession should stop blocking the assisted dying agenda.

We need a greater insight into the unspoken but obvious inherent bias in health care towards the views and attitudes of the young.

For as much as I want to be 20 again, there is no escaping the fact I am 50, and it is not just about the views of the young

Des Spence,

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