

THE HAZARDS OF MIDDLE AGE

WELCOME

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(Chairman of the Yorkshire Faculty)

MY FIRST duty this afternoon is to extend a welcome to you all to this symposium, the first that has been organized by the Yorkshire Faculty. I have had the pleasure of attending other symposia organized by our neighbouring faculties, and I hope that this one will be no less enjoyable and instructive than the ones I have attended. We welcome our own members here this afternoon, but especially do we appreciate the presence of those from outside our borders. A Yorkshireman, you know, has a reputation of being a pretty independent sort of fellow who likes to keep himself to himself, but once you have penetrated into his domain, as you have managed to do this afternoon, the warmth of his greeting is second to none and we are grateful for your support and interest. Of our distinguished speakers I will say little at this point, but I welcome them too and hope that they will feel very much at home with us this afternoon.

We are to discuss "The Hazards of Middle Age", a subject perhaps of more than professional interest to all of us; it may be that in discussing the problems of middle age we shall be discussing some of our own personal problems, for a doctor at any stage of his career hardly likes to think of himself as other than belonging to the middle years of life. How else can you explain the sudden sprouting of a moustache as a sign of maturity immediately after qualification and its equally mysterious disappearance 10 or 15 years afterwards, when the purpose for which it was grown has disappeared? Neither

do we acknowledge senility within our ranks; there is no such thing as a geriatric doctor, but we make use of our bald pates, our wrinkled foreheads and sagging cheeks to give added weight to our opinions and judgments while we still try to maintain our youthful vigour and energy.

The speciality of paediatrics is already well established and that of geriatrics is already being developed, with possibly not quite the same justification. I want to say here and now that we have no intention of leading the way to yet another fragmentation of medicine by even hinting that mesiatrics or whatever you like to call it, should be separated from general medicine and put in a special compartment of its own. We as general practitioners are concerned with the whole man during the whole course of his days and middle age is but a phase in life's story, between the infant mewling and puking in his nurse's arms to the second childishness and oblivion of senility. But it is a terribly important stage, and yet, because it lies between the extremes, it has tended to be sadly neglected and passed over as a serious object of study.

We may be inclined to think that middle age is the high plateau of life's span when early achievement has been consolidated and there are no hidden pitfalls or hazards, but a moment's reflection will convince us that this is far from the truth. A promising career in a man with a growing family is shattered by an unexpected coronary thrombosis, or the development of an inexorable cancer, and there is tragedy not only for the victim but for his dependants. These are the more dramatic things which may happen in the middle years, but others more insidious in their development create their own problems. It is the time of the beginning of hypertensive changes, when the diseases of metabolism possibly related to decreased glandular activity come into their own, with impaired efficiency just at the time when the demands upon the individual are at their maximum and when the foundations for a healthy and contented old age can be seriously undermined or even destroyed. Not the least important are the psychological aspects of the middle years, the desperate attempt to appear young in spite of an awareness of a slowing-down of reactions and of a memory that is not quite so keen as it used to be. It is the time when the ogre of depressive illness begins to exert its power, when striving for more achievement loses its attraction, and we begin to wonder, What is the use of bothering? What is the point of striving? What is there to live for? In the opening lines of the Divine Comedy,

Dante wrote of this dilemma—

Mid-way this way of life we are bound upon
I woke to find myself in a dark wood,
Where the right road was wholly lost and gone.

(Trs. *Dorothy Sayers*)

The purpose of this symposium is to help us all to give guidance and support to our patients in this phase of their existence and I suggest there is no-one who can undertake this task more effectively than the general practitioner, the friend and counsellor of his patients at all stages of their life's journey.

It is now my pleasure to introduce to you Dr Murray Scott, who will talk on "Middle Age as Seen by the Family Doctor". Dr Murray Scott is known to everybody in the Yorkshire Faculty as the first chairman of our faculty board. He is a member of the council of the College and a lecturer in general practice to the University of Leeds.

REFERENCE

Wallis, J. H. (1962). *The Challenge of Middle Age*. Routledge & Kegan Paul, London.

MIDDLE AGE AS SEEN BY THE FAMILY DOCTOR

R. A. M. Scott, M.A., M.D. (*Leeds*)

It is implicit in our will to live that we cling to youth, that we refuse to acknowledge the symptoms of age and even fail to recognize the signs thereof. Yet Time's silent stealth has produced changes in body and mind. Both lose elasticity; a time comes when after the skin at the back of the hand is pinched it takes a moment to resume its position. Wrinkles of the skin of the face from constant habit become permanent. This is may be a sign of age but not of necessity one for gloom, for the Cox's orange pippin when kept till it wrinkles is at its sweetest. We jump carefully down two steps when before we took three in our stride. The children pick up the new game faster than we do. At 45 years we require half as many again consultations as we did at 15 years to get over our attack of bronchitis. At 65 we shall require twice as many. Our response to allergy or to toxic processes lessens. Our hay fever goes, chilblains are rarer. The youthful agony of doing the wrong thing becomes almost a joke. The ecstatic joy of youth matures to a pleasant satisfaction. Finally and eventually in old age an intestinal obstruction or a coronary