The Hands-on Guide to Clinical Reasoning in Medicine
Mujammil Irfan
Wiley-Blackwell, 2019, PB, 368pp, £29.19, 978-1119244035

DEVELOPING CLINICAL REASONING

The Hands-on Guide to Clinical Reasoning in Medicine aims to provide a practical approach to undertake clinical reasoning for medical students in their training years, newly qualified doctors, and advanced nurse practitioners.

The book is written in an informal, conversational style with a friendly and coaching feel. To engage fully with this book, a reader must have a good working knowledge of a range of medical conditions.

The book is organised into clinical specialties including respiratory neurology and endocrinology. Each section is set out to provide an introduction to the topic including history taking, clinical examination, pathophysiology, and key investigations. The reader is challenged by a series of simulated clinical scenarios to evoke guided clinical reasoning. As a chapter progresses, further clinical information is presented to develop a case. Although readers can dip in and out of chapters, the glossary is a must to understand the acronyms used and the reader must consult the chapter guide.

Mujammil Irfan uses mind maps as representations of potential thought processes to guide the reader through understanding clinical reasoning. For a novice without developed patterns of clinical reasoning, each section may require a little more consideration; however, these could be easily parallel within clinical scenarios seen in early practice or discussed within medical school training. Reviewing this as a doctor qualified for a few years, the questions are thought provoking, with a patient at the centre. The prompts in the text serve as a useful guide to develop skills in clinical reasoning.

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Please Read This Leaflet Carefully
Karen Havelin
Dead Ink, 2019, PB, 320pp, £9.83, 978-1911585541

UNDERSTANDING ENDOMETRIOSIS

It would be impossible to read this book and not have gained insight into the physical, mental, and emotional pain of endometriosis. Please Read This Leaflet Carefully graphically depicts the suffering caused by endometriosis and sections leave the reader exhausted.

Starting with her character Laura’s life as a single mother in New York, relishing some of the freedom it brings, Havelin traces her past back to her childhood in Norway where she endured multiple allergies and, despite this, was a keen and accomplished figure skater. She describes Laura’s ambivalent relationship with her parents, especially her mother, and about her sexuality. There is a page-turning quality in her description of the challenges of her relationships and the love story element of it is compelling. Her dilemma, as a woman with a debilitating illness, about the ethics of bringing a child into the world will resonate with the equivalent dilemma being faced by many people contemplating pregnancy but concerned about the effects of climate change.

The detailed and harrowing descriptions of the effects of endometriosis mean that the book is not a comfortable read and her reference to the lack of listening and understanding of various health professionals [‘Doctors barely hear what you say’] make it even less comfortable: ‘If you’re too hysterical, they write you off. If you’re too calm, they do the same.’ The book chronicles Laura’s coming to terms with her body and some of the psychological journey could be applied to anyone living, or trying to live, with any chronic, debilitating illness.

Work done by Dr Kate Young, public health researcher at Monash University in Australia, has uncovered how doctors can fill knowledge gaps with ‘hysteria narratives’, and she has found that this is especially likely to happen with endometriosis. Prior to the 1990s women were routinely excluded from clinical trials and, even now, based on unbiased assumptions about risk, women are often misdiagnosed, for example, in cardiac disease.

This book joins several others highlighting the biases and prejudicial attitudes afflicting many women’s health problems. Because this is such an important subject and because this book is such a good read, it richly deserves to be included in GP teaching reading lists.

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Love Until It Hurts
Fiona Blakemore
Independently published, 2019, PB, 454pp, £8.99, 978-1697350999

A MEDICAL PSYCHOLOGICAL THRILLER

Ruth Cooper is a young GP, recently returned from Australia and recovering from a personal trauma, and working under
pressure in an urban practice. A couple of clinical errors lead to a formal complaints procedure, and at this vulnerable time she is introduced to Dominic Peters, not long widowed and caring for his 4-year-old daughter, Bella. Ruth is soon emotionally engaged with both of them, and finds herself drawn into a complex situation involving suspicions of fabricated illness and doubts about Dominic’s motives. The narrative races along, helped by the use of the present tense and the bite-sized chapters, and the tension ramps up steadily towards the satisfying denouement. It comes as no surprise to learn that Fiona Blakemore is the pseudonym of a practising doctor, and this is her first, self-published novel. As a medical psychological thriller it succeeds well enough, and may provide some welcome relief from reading about COVID-19.

Some recent Amazon reviews:

‘There’s quite a lot of medical stuff, as you would expect but this is an impressive debut.’

‘Very good character development and an interesting insight into the world of a GP. The plot developed well and the ending was very well crafted and kept me guessing until the last.’

‘Intertwined themes of Medicine, finance and controlling behaviour make for a real page-turner.’

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**USING KINDNESS TO MAKE TEAMS WORK MORE EFFECTIVELY**

This is the second edition of Intelligent Kindness. Originally written for managers in the health services, this second edition has increased its scope to include managers in the social services. While there is something on the national policy level and something for individual practitioners, the bulk of the book is aimed at managers of teams in health and social care. It comes highly recommended with ringing endorsements from Iona Heath and Phil Hammond.

The basic thesis is one with which most GPs will be familiar and in full agreement — which does not mean that the case for it does not need to be made. Since the founding of the welfare state and the NHS, in the full flush of national solidarity after the Second World War, there has been a slow but inexorable retreat from the values of fellowship and compassion that then motivated my parents’ generation. There has been increasing bureaucratisation, fragmentation, regulation, and loss of autonomy by practitioners since that time.

The book’s argument is that if values of kindness were intelligently applied across the system — hence the name of the book, Intelligent Kindness — then the effectiveness of the system would be measurably increased. By kindness, the book means not just compassion, but also the belief that we are ‘of the same kind’, ‘in the same boat together’, that we are all kin, that we all belong to the same family.

The book gives the example of the ‘Reclaiming Social Work’ model.1 In social work teams dealing with child abuse, practitioners were typically spending 80% of their time on paperwork and 20% with clients. After this intervention, which involved breaking a larger group into smaller teams with a mutually supportive ethos, and training staff in systemic therapy, practitioners were spending 60% of time with clients and 40% on paperwork. There is clearly much modern managers (and many GPs are now involved in managing CCGs and so on) could learn from this book. Equally there is good introduction to the literature of many different specialist fields, such as group dynamics or compassionomics;2 which provides useful insights on how to manage teams. The book is well written in clear and accessible English.

Why then did I find it so difficult to read? Much of the book is ‘motherhood and apple pie’, that is to say, its message is obvious to anybody except an NHS middle manager running a team on a shrinking budget who needs to pretend that they can meet their targets. More seriously, written by two psychiatrists and a management consultant, it seemed to me to avoid the reality of evil. Even in a well-managed team with good communication, people can still be greedy or lazy. What is needed is a proper balance between autonomy and regulation.3,4 Admittedly, current NHS teams almost all have too much regulation and too little autonomy.5 On the national scale, we now have politicians who no longer share the values of compassion and kindness that the authors of this book and most GPs take for granted, but rather have turned to an exclusive nationalism typified by the recent ‘hostile environment’.

So, this book is a ‘must read’ for NHS managers who want to use intelligent kindness to make their teams work more effectively. Here they can find some techniques to enable them to do so. It will also help them to put the case for such changes cogently to more senior managers. The book does not, however, address (nor claim to address) the moral, philosophical, and religious question of why, as a nation, our values have drifted so far from those of our parents.

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