

Life & Times Therapeutics?

According to Sir William Osler, *'the desire to take medicine is perhaps the greatest feature which distinguishes man from animals.'* As doctors, we usually attempt to prescribe rationally, although even here there is plenty of evidence that might dispute that. But the patient also makes treatment decisions. Just as cats chase mice but don't necessarily eat them, humans chase medicines but don't necessarily take them.

Our therapeutic endeavours are subsequently customised by so much psychology and anthropology it is little short of a miracle that, given modern drugs have real effects at a fundamental biochemical level, we generally do more good than harm. At least, usually. Probably.

And we do indeed have an arsenal, sorry, a pharmacopoeia, of drugs that would make our apothecary forebears salivate with anticipation (assuming they had not been careless with the belladonna, that is).

A SICK SOCIETY

But the irony is that the more we medicate the more pushback we get from our Western ways of living. We eat too much and move too little and need new knee joints and better antidiabetic drugs. We behave towards each other as if we are solipsistic bystanders, and we wonder why our own mental health has suffered. We are insatiable consumers, and we wonder why our planet is looking fragile.

As GPs we are not going to pack away our prescription pads (remember them?). Prescribing is a genuinely important part of what we do. But if we only had a pill that would enable our patients — and we ourselves — to act as rational agents within communities committed to mutual respect and



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support, living on a planet tended by us as a much-loved garden, well then we would have discovered the philosopher's stone. So is there nothing we can do, other than dole out more metformin, antihypertensives, and SSRIs? In this month's *Life & Times* we have challenging articles relating to our own lifestyles and health, and indeed to the health or sickness of the planet.

CAN WE BE TOUGH ON THE CAUSES OF DISEASE?

We know much of this already, but as GPs we also know it is an uphill struggle. In 1984, when I started as a GP partner on a housing estate in South London, there were two grocers selling fresh vegetables on the estate's two parades of shops, and two fast food take-away restaurants.

By the time I left a few years ago there were no grocers, just a few rather sad-looking vegetables in a mini-market, and twelve take-aways. 'Healthy choices' sounds hollow.

And as for community — the council's housing policies separated extended families,

so that young parents had no grannies on hand to advise and support. Policies that did not advantage existing community members were fair but also degraded family networks.

But the world ever changes. There is also a great community garden project, and many other local groups that have sprung up to replace the social vacuum left in the wake of so much short-sighted political carelessness.

So how can we fit into a complex and changing bigger picture? Much of medicine's rhetoric is about health, yet we know that we spend most of our time fire-fighting disease. It is right that we are tough on disease. But what chance being tough on the causes of disease?

As GPs we don't just need a new contract (one that makes sense for a change), but perhaps it is also time for a new health manifesto. Who will forge such a manifesto if not us? We find ourselves in the deepest crisis of our professional lifetimes, but we ourselves are rational agents who have the sense and expertise to find a better way.

For once, it wasn't Osler but Confucius who said *'it is better to light a candle than to curse the darkness.'*

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