How to Teach Economics to Your Dog. A Quirky Introduction
Rebecca Campbell and Anthony McGowan

A WALK IN THE PARK

I enjoyed this book because it introduced me to a topic of global importance under the guise of a fun holiday read. It is very much aimed at the beginner without any formal economics education when it comes to classical economic theory, but covers a lot of concepts that help us understand some of the decisions being made by the policymakers and industry leaders around us. It also begins to arm the reader to critique some of the more dubious ideologies and approaches demonstrated by people in power.

The method adopted by this book that makes it a fun read is one that has a long heritage. The idea of a dialogue goes back to ancient times with many of the philosophical classics taking place as dialogues between teachers such as Socrates and different kinds of learner or disputants. In this book, however, the dialogue is between an economist and her small dog, Monty. Each chapter is a ‘walk’.

The economist is married to a philosopher and they have two children, all of whom are referred to from time to time as several instances of domestic comedy or weaponised to unpack ideas, such as the invisible hand of the market, which emerges from a story about the household toaster. Is it not amazing that the toaster can be bought for less than £15.00, and yet to try to assemble one from scratch would cost a member of the public many times that amount and require skills and resources that few possess?

The book is, in fact, written as a partnership between its two authors themselves, a lecturer in philosophy and a lecturer in economics. They also, in real life, have a dog, who has starred in a previous volume, How to Teach Philosophy to Your Dog: A Quirky Introduction to the Big Questions in Philosophy.

We all need to enjoy learning about society from time to time (emphasis on enjoy). Many of the concepts discussed in this book have a direct bearing on policy and practice in relation to primary care. At the very least, the effect on government policy on welfare should be something that is understandable by those who have to pick up the pieces. Globalisation applies to the migration of workers, as well as to consideration of ethical procurement in the supply of medical consumables from cotton swabs through to disposable equipment.

Thinking about how our supply chain works also has implications for medical education and the future medical workforce — the NHS effectively trains its own future healthcare professionals. While many of the readers of this journal may be all too familiar with these concepts, many are not. In his published James Mackenzie Lecture, Martin Marshall lamented the lack of political engagement of GPs:

‘Rather than complaining that there is a Machiavellian plot to destroy general practice, we need to enter robust and informed discussions about the pros and cons of the current model. Rather than revelling in our small business ethos we need to recognise that collectively general practice could be immensely powerful. Just look at our economic clout.’

I read the book and wondered whether some of that disengagement stems from a lack of academic literacy, at least when it comes to politics, economics, and indeed political economy. This little book is a fun introduction and an easy read.

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REFERENCE

Building Blocks in Paediatrics
Al Nicholson and Kelvin Dunne
Elsevier, 2022, PB, 420pp, £41.31, 978-0323834216

BUILDING BRIDGES BETWEEN PRIMARY AND SECONDARY CARE DOCTORS

There are many difficulties to being a GP, but the old saying is true — it’s great to actually see patients and to practise medicine.

One of the reasons I became a GP was that I loved medicine and I loved seeing patients, but I hated the depersonalisation of patients that happened in hospitals. But having found my niche as a GP I then made another discovery: that there was a brick wall between general practice and hospital medicine.

The brick wall got higher over my professional lifetime. It became more difficult to talk to consultant colleagues —
indeed I gradually seemed to know fewer of them personally. Then – the coup de grâce – GPs were no longer allowed to park in the consultant’s car park (remember the days when doctors could park in hospitals for free?). So we rarely attended clinical meetings together.

Perhaps the brick wall was at its lowest in the care of children. It’s not only that so much of our work is with children and that sometimes the stakes are high, but there is also a lot of shared ethos between GPs and general paediatrics. So – here’s a crazy idea – wouldn’t it be great if we could learn at the grassroots level together? Building Blocks in Paediatrics does exactly that, edited by two terrific and very down-to-earth paediatricians with contributions from one and all, including GPs. It builds bridges. It builds a bridge between the everyday presentation of undifferentiated children’s problems and the core of paediatric medicine. But it also builds bridges between doctors working in primary and secondary care, establishing a shared body of knowledge and practice.

It is a book written by clinicians, for clinicians. It is in a large, softcover format, divided into four sections. First, ‘Core essentials’ gives the big picture, covering history and examination, the newborn, feeding issues, growth, puberty, and adolescence. Second, ‘Symptom-based approach’ covers all common presenting problems, from earache to evaluating the dysmorphic child and so much in between. Third, ‘Paediatrics in everyday practice’ deals with issues such as ‘frequent flyers in the toddler years’ and adolescent health. The book has general practice written all over it.

The final section takes a step back and looks at rational investigation, issues of professionalism, learning from clinical events, ethics in child health, and critical appraisal of the literature. This section covers clinical reasoning, information overload, and diagnostic uncertainty, demonstrating a grounding in everyday clinical practice.

It is a very approachable book and immensely practical. It is well laid out and well illustrated, easy to read, and comprehensive enough for the GP or the general paediatrician. The book is full of experience and wisdom, and will resonate hugely with GPs. It is absolute gold dust for doctors in the training grades, both in general practice and paediatrics. But having practised as a GP for 30 years I still found so much that broadened my knowledge and deepened my understanding (trainees, and perhaps even the occasional more senior doctor, will appreciate the eBook version that comes free with the hard copy book itself, and that can be downloaded to any device). This book will not only help you to look after children’s health needs, but it will also help you to develop as a better and more thoughtful doctor. Yes, it will be great for trainees, but if I were still in practice I would be giving it a prominent place in my own personal development plan.

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Competing interest
David Misselbrook reports knowing the editors personally as colleagues and friends. He also contributed to the chapter on professionalism and ethics in child health.

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