

Practicing Medicine in Present Scenario

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The practice of Medicine combines medical knowledge, intuition and judgment. It requires the ability to extract information from a mass of contradictory physical signs, laboratory data and imaging films. It involves judgment, to determine when a clinical clue is worth pursuing or when to dismiss it, whether *to treat* or *to watch*, and to estimate in any given patient whether a proposed treatment entails a greater risk than the disease.⁽¹⁾

The editor of the first edition of Harrison's, Internal Medicine⁽²⁾ articulated in words that "No great opportunity/responsibility or obligation can fall to the lot of a human being than to become a physician. In the case of the suffering he needs technical skill, scientific knowledge and human understanding. He who uses these with courage –with humanity and with wisdom will provide a unique service to his fellowman and will build an enduring edifice of character within himself. The physician should ask of his destiny no more than this; he should be content no less".

In the present scenario patients are losing faith in doctors. It has become difficult for the patient and the doctor to gain rapport with each other. The direct one to one- doctor and patient relationship is weathering. The patients are more demanding, acting like customers and having unrealistic expectations; they expect outcomes proportionate to the money they are spending. The increasing number of legislation, supporting unqualified health provider to act as doctors is adding to the vows of qualified doctors, and health system as a whole. Is this the repercussion of our apathy towards the patient or it is due to the change in the way medicine is being practiced today?

Uncertainty is an inevitable aspect of clinical practice. We cannot predict with certainty what the outcome of disease would be for a given patient, nor can we always predict whether a patient will have an unexplained side effect from a drug, and making diagnosis at times can also be difficult. A good doctor may weigh all that he knows, and then in good faith make a decision that maybe detrimental to the patient. However, this does not mean that the doctor tried to do a wrong thing.

Although he was well informed, but the line of action that the doctor pursued lead to a bad outcome. This may specially be true in emergency situations, when a decision has to be taken very rapidly. We cannot ever make a perfect doctor and even with the

best will, unwanted outcomes will occur. The same applies in all human activities; even the best car driver can have an accident. Doctors may feel that acknowledging uncertainty is admission of failure or a threat to their expertise.

Respect and trust of physician with patient and within society is gradually diminishing. This can be because of inability to communicate properly the risk of treatment, limitations of treatment, prognosis of the disease in spite of best treatment. Some doctors use unethical means to meet the commercial interests of pharmaceutical industries and diagnostic centers. Some corporate hospitals provide incomplete, wrong or distorted information for their financial benefit. Unfortunately, violence against doctors is also increasing day by day. This is very painful. Off late, doctors have been grievously hurt, some have lost their lives also. This should not jeopardize our efforts to give their best for the well-being of patients.

The patient expects sympathy and understanding from the doctor, as he is not a collection of symptoms, signs, disordered functions, damaged organs and disturbed emotions. He is human, fearful and hopeful, seeking relief, help and reassurance. A true doctor has a Shakespearean breath of interest in the wise and the foolish, the proud and the humble, the stoic hero and the whining rogue. He cares for people.⁽³⁾ Proper communication with patients and their relatives is of utmost importance. In an unpleasant situation if we remain calm, explain things, understand the anxiety and emotions of patients and their relatives then many unpleasant incidences can be prevented.

There are only few who are bringing defame and disrespect to the profession. It is for the new generation of doctors to choose the right path. There are many doctors who can keep Shakespearean thoughts alive, and maintain the glory of medical profession. Social activist, media, government leaders and intellectuals need to raise their voices and contribute to fulfill this aim.

References

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