A HUNDRED YEARS AGO

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THE GENERAL PHYSICIAN: NOW AND IN THE FUTURE

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I HAVE USED THE WORD 'Physician' rather than 'General Practitioner', for the latter is essentially a man who is obliged, in the country, to practise all that is included in the words: Medicine, Surgery, and Midwifery. I would define the general physician as the man who has a general knowledge of medicine, and who realises his limitations; to know what he does not know; to admit that help is to be gained by calling in a specialist.

Whilst realizing that each branch must co-ordinate its work with the others, I would like to divide medicine as it appears to me as: 1 Preventative; 2 Diagnostic; 3 Curative.The field of Preventative Medicine is mainly that of the public health officer, but he in turn must depend upon the next branch, namely, that of the Diagnostician, for early notification of disease of a preventable and infectious nature. The Curative branch is to my mind, strange as it may seem, the least important of the three. Many medical ailments at present get well in spite of the physician and his drugs. The most important thing is correct and early diagnosis; many serious illnesses would be avoided by earlier recognition of the symptoms.

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The public is to blame for much that it suffers by never consulting a doctor until its own diagnosis and idea of treatment (or those of non-medical friends) have been tried and have failed. The doctor is expected to make a diagnosis and to treat the case in the penny-in-the-slot fashion so the patient comes out of the consulting room in a few minutes with some hieroglyphics on paper guaranteed to cure. The length of time allowed is not much more than the Chinese medicine man requires to shake the sticks out of his box. The doctor has never seen him before, during his normal state of health, so cannot say how far he has departed from it.

The public cannot understand that a small thing, such as a cough, may be due to many causes, and that the early and correct recognition of the cause may call for the help of specialists. Again, the average patient does not consult a doctor until something has gone wrong.

The patient often wishes to have a second opinion, but is afraid to say so, lest he should offend his doctor, and so goes off to all sorts of specialists independent of the doctor. It is a dangerous way of seeking help, for each specialist is bound to have his opinion tinged by his specialism.

I have recently seen an old patient of mine, who suffers from nervous exhaustion; before the war I had been able to direct his steps, when worried by subjective symptoms, to men whom I knew would listen to what I could tell them about his history. The war took me away on military service, and in my absence he started on a course of consultations with specialists. He had his nose operated upon, underwent two abdominal operations (the last being the removal of a large part of the colon), treatment by an osteopath, and a course of treatment abroad by a specialist in ductless glands. He is now, on the advice of a specialist in Paris, going to Plombières for treatment. I am wondering what is expected from Plombières douches in a patient who has lost most of his large intestine. The man is a walking encyclopaedia of specialists. The habit of consulting a specialist has become with him a vice. This man would have escaped much, had he fallen into the hands of a general physician at the end of 1914.

Advice to general physicians

If, in the future, general physicians can be persuaded to collect the records of their practices, we should get something we do not at present possess, i.e., a good work on prognosis in diseases when they occur among non-hospital patients.

Advice to the public

The advice I would give to the public is to treat its own engine at least as well as it does its automobile, i.e., do not wait until it breaks down before having it overhauled.

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Select a good general physician and get him to examine you when you feel at your very best; let him make his notes on your condition, and, if no defects are found, go on your way, reporting again in six months. If illness comes, the physician will know how far you have departed from your normal. Should he find trouble outside the province of a general physician, let him call in the men whom he knows to have made a special study of that system. He will then make a really correct diagnosis as far as such a thing is humanly possible.

Only when this general examination becomes a routine measure in the life of the public, shall we get to the ideal position of detecting disease at the very beginning, and so of curing diseases which are often incurable when a patient comes to consult us now.

