

Professor Sir David Haslam
CBE FRCGP
Past President BMA,
Past President RCGP

Prevention success stories often go unheralded

THE CURRENT NATIONAL VACCINATION PROGRAMME FOR COVID-19 HAS BEEN a remarkable success of historic proportions. Whether carried out at major district hubs or in small GP practices, the logistics, the organisation, the friendliness, and the positivity, are all attributes that everyone involved can be proud of.

Many GP teams have found this work challenging but also incredibly heart warming.

To manage a cohort of patients who are all happy and grateful to be seen (with no chance of a 'while I'm here doctor...' follow-up question) backed up by a slick and supportive administrative team, has been a really positive part of their work for so many family doctors. This has been something of genuine importance. General practice has really delivered.

As a nursing director in one of my local trusts put it in an interview: 'This has probably been the most important thing I have ever done in my long professional life as a nurse.'

I know exactly what she meant. The simple act of vaccination is undramatic and rapidly delivered, and yet can prevent all the horrifying and life-threatening events involved in acute COVID-19 infection, with its potential long-term ramifications.

Away from the national vaccination programme, the problem with prevention is that it is so unexciting. Can you imagine how many viewers would switch on for *Holby City* or *Casualty* if DIY enthusiasts used the right equipment, safe cars didn't crash, well maintained appliances didn't explode, and well timed preventive care saved people from having heart attacks and strokes?

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We all absolutely understand and appreciate that prevention is the best policy, and that if we were in the patient's shoes we would always choose prevention over care. Be that as it may, you rarely hear a group of doctors chatting about the successful blood pressure control or weight loss sessions that their practice is running.

Banter is much more likely to be about dramatic cases, or diagnostic conundrums, than it ever is about prevention.

As I look back on my career, I'm certain that the most useful interventions I was involved in actually resulted in nothing happening. Whether it was in my role as a GP, or in my leadership roles across the profession, a successful day's work most often resulted in no apparent outcome.

Helping someone lose weight, quit smoking, and getting their blood pressure under control is hardly exciting work, but the potential benefit is enormous.

The problem with prevention is that no one knows for certain that an adverse outcome will be avoided in a particular individual.

There is just an epidemiological statistic showing that overall outcomes have improved. It's very frustrating.

I found it was the same when dealing with healthcare policy or politics at a local or national level.

There were many days when I hoped and believed that I had managed to prevent poorly thought out policies from being implemented. The net result was that nothing happened. There was no story to boast about, not if I wanted to retain a position of influence for future discussions and challenges. But I was more than happy to have it that way.

That's part of the lesson of most forms of prevention. Appreciate it for the immense potential benefit that it is, but don't expect recognition or thanks.

Not unless you are giving COVID-19 vaccinations, that is.

Tell us what you think?

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