HASLAM'S VIEW



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Are all GPs hypochondriacs?

I'VE NEVER QUITE UNDERSTOOD WHY EVERY DOCTOR ISN'T A HYPOCHONDRIAC. OR MAYBE THE REST of you are, but you hide it rather better than I do.

I used to think it was just me. Then on Twitter a while ago, I saw a doctor write about having got out of bed, walked to his bathroom, felt this sloshing sensation around his lower abdomen, and instantly self-diagnosed ascites – with all its drastic implications. He then realised a hot water bottle was simply caught up in his dressing gown!

My first reaction, other than laughing out loud, was to be thankful that someone else suffers from hypochondria in the same ridiculous way that I do. Not that I've ever self-diagnosed ascites.

However, I have had more potentially fatal conditions in the course of 24 hours than anyone I have ever known.

Of course, I didn't consult anyone about any of them but it beats me how doctors can be expected to be otherwise.

After all, as a GP I saw people with trivial chest twinges that were completely atypical of anything at all and who fatally dissected an aortic aneurysm within the hour. I've had chest twinges like that…

I'm aware that indigestion could be cardiac (except when it is – well – indigestion), that tiredness can be an early sign of malignancy (except when it is caused by insufficient sleep), that insomnia can be a sign of depression (except when it's caused by too much caffeine), that forgetfulness can be early dementia (except when it is typical for my age), that thirst is almost certainly diabetes (except when it is caused by not drinking enough). And indeed, that listing everything in this way can be a sign of OCD, or maybe even, perish the thought, hypochondriasis.

'I have had more potentially fatal conditions in the course of 24 hours than anyone I have ever known'

As they are rumoured to say at the entrance to Hypochondriacs Anonymous, 'Your first step is to admit that you don't have a problem.' Not always easy.

The reason that so many doctors have a problem with worrying about their health is they know the possibilities – they don't have the luxury of being unaware of the significance of a symptom.

The internet has provided that knowledge to everyone else. The internet is a wonderful and astonishing thing, a source of remarkable power and of opening access to information.

Anyone with a smartphone or computer now has access to all the knowledge in the world. They also have access to all the anxiety that goes along with it.

Type *headache* into Google, and you will get 28 million results. If you use a symptom checker program and put in a random pair of conditions – say *headache* and *dandruff* – it will list a terrifying selection of possible diagnoses.

The use of Doctor Google tends to be deeply upsetting to many GPs, who rail against the stream of patients clutching printouts about self-diagnosed rare ailments – 'I think this must be lupus, doctor.'

However, helping our patients understand and interpret the anxieties triggered by what they have found on the net will inevitably be part of our role.

We can't complain that patients are insufficiently engaged with their care, and then complain again when they are. Maybe we can point them in the direction of the most informative websites.

And the trouble with hypochondria is that after numerous episodes of crying wolf – wolves will eventually arrive. Remembering this is yet another key skill for everyone working in general practice. Challenging, isn't it?

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