HASLAM'S VIEW



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Listen to your patients

WHAT IS IT ABOUT SOME DOCTORS THAT MAKES THEM DECIDE TO MAKE THEIR LIVES, THEIR work, and their practice so much harder than it need be?

A good friend of mine was recently admitted to hospital. She has pretty dreadful veins, and as she has a chronic condition that often needs intravenous therapy, she is also understandably anxious about keeping her available veins in good condition.

A junior doctor was sent to put a drip up. She pointed out – kindly – that he was unlikely to succeed if he went ahead with inserting a venflon into the vein that he had his eye on. 'I know what I'm doing,' he said. And so, against her protestations he went ahead, hurt her, and with absolute inevitability failed.

The mystery to me is why he didn't listen, or maybe didn't want to listen. In what other trade would you wilfully ignore the advice of someone experienced who could help you do your job better and make a potentially tricky task much easier?

It doesn't just make me cross, ashamed, and embarrassed for our profession it really does puzzle me. It's just so unnecessary, and the only explanation I can find is sheer brazen arrogance.

The other day I was asked to see a baby who was struggling to breathe. She had a cough, and on examination had intercostal recession, tachypnoea, and nasal flaring. It was as clear a case of bronchiolitis as I can recall, and she needed to be admitted.

The paediatric house officer listened to the story, and then said, 'What are her sats?' I repeated the clinical findings. 'This baby is struggling to breathe,' I said. 'She really needs to be admitted.'

'Well,' said the paediatric house officer, 'I think you should do her sats. I don't see how you can possibly say she is sick if you don't.'

I'm a pretty placid sort of guy, as Tony Blair might have said, but this was one of those rare occasions when I lost it. I'm still ashamed that I said: 'Look, I've been doing this job for more than 30 years. I know a sick baby when I see one. You will admit her now,' but, to be honest, I think I was justified.

'The secret is to shut up, listen, care, and know something'

I felt really bad about it and know that he will even now be chuntering to his colleagues about this bolshie old fool of a GP who hadn't even done the sats, but I'm also equally mystified.

Where did his arrogance come from? If medicine has taught me one thing, it's how little we know, how difficult the job can be, and the absolute importance of listening and learning. More than anything it has taught me to listen.

A while ago I was asked if I would give a video presentation on my model of consulting skills, to explain whether I was a disciple of Neighbour, Tate, Cambridge/Calgary or any of the others. I gladly agreed, the cameras were set up, the microphone attached.

My interviewer asked me to explain my views.'It's quite straightforward,' I said. 'The secret is to shut up, listen, care, and know something.'

'Go on,' he said.

'No, I've finished,' I replied. 'That's it.'

The secret is probably in the caring bit. I don't mean it in some soft and fluffy psychobabble way, I mean just be interested in, and really engaged with, the human being in front of you. If you do that, and you combine this with knowledge and some skill, you're almost there.'

Doctors who insert drips in the very spot that an experienced patient tells them will not work cannot possibly care. My paediatric doctor wasn't listening. Both of them were breathtakingly arrogant. But where does it come from, and what can we do about it?

Tell us what you think?

If you want to share your experiences or views with other readers, write to: **editor@thepractitioner.co.uk**