

Death of the Good Doctor

We all have stories about our engagements with doctors and a good many of these stories seem to be about the quality of the doctor-patient interaction. Although most doctors are reasonably civil in their interactions with patients, many do get aggressive when patients express doubts or question them about tests or prescribed medication. This problem has recently been only compounded by the spread of the Internet among certain sections of the population, as there is not much that is not available out there as information. This has merely ensured that the engagement between doctor and patient is fraught with even more tension: Helplessness and vulnerability on the part of the patient, latent aggression on the part of the doctor. All this is set against one basic issue which is the complete disappearance of the doctor-as-healer.

Many a times even basic expectations have not been met in routine doctor-patient interaction: There is a blatant disregard of the patient's needs, and a total incomprehension of patient rights. Increasingly, when ordinary people visit doctors, they have to let go of any reasonable expectations regarding their rights as patients if they want their needs to be taken care of. This rarely happens with other professionals such as architects or lawyers where we continue to negotiate with them in attaining this fine balance.

It remains the case that with doctors we are all reduced to being the most passive 'consumers' that any sector has experienced; we take anything that is dished out and at any price because we are scared, sick and vulnerable. No matter where they work, large hospitals, government or corporate, nursing homes or clinics, or even private practice, doctors are increasingly the same. Visit a government hospital and we make excuses for doctors saying they are working in terrible conditions; visit a doctor in a corporate hospital which resembles a hotel and here too it is the same attitude, albeit couched in more socially acceptable behaviour. Is there something more to this than meets the eye?

To be fair, 'navel gazing' has been done by some senior doctors who have reflected on ethical issues within medical practice and the understanding is that it is partially caused by the increasing desire for money amongst younger doctors. This

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is in keeping with the trends in larger society where everyone is desirous of selling their skills and knowledge to the highest bidder. People are spending a lot more on medical education these days since a variety of private medical colleges have come up which charge substantial amounts as fees. Thus, it appears that there is a pressure to get the best 'return' on this investment. Both reasons are indeed valid but since we see these trends even in other sectors of the economy, perhaps to a lesser extent, the question arises: Do we have different expectations of our doctors?

Emerging narratives around medical practice now focus on the need to observe patients' rights while satisfying their need for care. The absence of a social discourse bringing together the larger issues underlying medical practice such as the efficacy of the doctor, their increasing commercialisation and the advent of new medical technologies enables doctors to function as ambivalently as they do nowadays precisely because the larger society cannot draw upon anything to make them accountable for their work. On the one hand they obviously cannot be held 'accountable' like we do the service sector; on the other hand, their naivete reveals them to be not quite as sensitive to people and issues as their knowledge base requires them to be. Somewhere along the way, doctors appear to have lost their way and in doing so, have given up their very identity. Whatever happened to the good old doctor?

A good doctor was defined in the form of the doctor with a good bedside manner. They got the most patients and did half the healing just by their behaviour, interactions, their touch or the way they spoke. Although even those good doctors also had to be 'effective', the way they went about their engagement with the patient was a very im-

portant part of the healing process. Thus, the basis of efficacy of one of the most highly educated and high status professions rested until recently on an ethics of care. Further, since medical technology had not intruded as it has today, there was no requirement for doctors, for instance, to wonder about whether such technology was socially relevant, required, or even just.

This cadre of the old-style neighbourhood GP has all but vanished in an era of increasing specialisation and corporate hospitals. Whether you have a headache or a heart attack, both require a visit to a hospital. Ironically, nowadays 'EMERGENCY' is a ward in a hospital, not something that happens at home in the middle of the night and could easily be taken care of by a quick visit from a local doctor down the road.

As the ecosystem of the medical profession changes, as medical education becomes more expensive and increasingly youngsters get into medicine for money, the sine qua non of the old fashioned 'good' doctor, based on an ethics of care and healing, has all but disappeared. Even as we have reduced our expectations of them to their efficaciousness, the innocence with which new technologies are routinely recommended by doctors has depleted their strength as healers.

From being a shaman, a magician who healed with a plethora of skills, a cultivated knowledge base and intuition, the doctor is now the person who diagnoses without a touch, and repairs the body without healing. Something certainly may get 'fixed' in the body but we remain scarred by the interaction. Thus, the loss of perception of themselves as healers is a gigantic loss for allopathic doctors, as indeed it is for all of us.

Set all these issues against the fact that people are not getting relief from their ailments and are increasingly moving away from allopathy to alternative healing systems, and you get a picture of the pressures on allopathic doctors. This is unfortunate since there are some definite gains that conservative modern medicine does offer many diseases. But unless the medical profession brings back some humaneness into their engagements with patients, everyone loses out on the benefits of modern medicine.

(Views expressed in the column are the author's own)