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Sticks & Stones

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When we were children, a common taunt we tossed around was, "Sticks and stones may break my bones/but names will never hurt me." Well, we were wrong. Words contain power, and how we use those words determines how we deal with the world, and how the world deals with us.

Thirty years ago, or so, when we got demoted as doctors and re-labeled as "Healthcare Providers," and patients morphed into "healthcare consumers," or (more odiously) "clients," the entire nature of the physician-patient interaction was forever changed. What previously had been a human one-on-one interaction, which may have even contained a spiritual dimension, turned into a simple business transaction.

The process was complete when medicine was transformed into "The Health Care System," and ultimately the greed merchants came up with "Managed Care," which should have woken up both doctors and patients. Managed Care can only be defined as the denial of medical treatment by a doctor to a patient so that someone else can save money.¹ The internal memos in the insurance industry confirm that by referring to patients as "loss leaders" and "expenses." When we parse the words we actually see what we get and what we've become.

We talk about "the Art and Science" of medicine, yet in the name of efficiency, cost containment, "productivity," or what have you, the art has been sacrificed. History taking has been taken over by pre-packaged, check box forms, or para-professional people, and the teaching and advising has been sub-contracted out to more "clinical specialists."

From time immemorial, the interaction with a patient has been a ritual, whether it was a Bronze Age shaman waving a rattle above a patient's head, or a 21st Century physician placing a stethoscope on a patient's chest while asking about his/her smoking habits. And it is this ritual that is part of the healing process. Multiple studies have shown that patients derive more satisfaction from their visit and do better when the doctor actually lays hands on them. Obtaining a history and talking *with* the patient is part of this same ritual.

It is in the taking of the history, and in the advising and treating that we practice our art form. How we, as artists, shape and mold the interview is paramount in our interactions with patients. For us to perform our art, we need time: time to establish relationships, time to tease out the seemingly petty details, time to bargain with patients to help them arrive to their unique path to health. As physicians practicing an ancient art form, the time commitment doesn't change. Human beings are the same today as they were a hundred years ago, when we became a scientific profession, and it takes the same amount of time today as it did back then to take a good history and build a constructive interaction with a patient.

But since we've become Healthcare providers, and patients have become clients we lost the time that's so important in our profession–just because patients are merely consuming commodities and a patient visit is predicated on 10-15 minute throughput, irrespective of what's actually going on. That's not time. That's an assembly line service, which leaves neither doctor nor patient satisfied. They say that, "The Devil is in the details," and by eliminating those details, we lose out on so many opportunities to improve and impact on patients' health.

By being downgraded by the powers that be into Healthcare Providers we've allowed ourselves to be co-opted and turned into automatons with fancy degrees and huge educational debt. We've allowed the experts and insurers to tie our hands into knots, and take away our artistry.

Our entire palette has been taken away, and all we're left with are shades of gray. The color, the nuance that used to characterize the doctor-patient interaction has been washed clean to a monotone, monotonous flat gray. A gray that is emblematic of cybernetic, mindless 'droids–representatives of a soulless gray technocratic robotic society and its moneyed interests.

If we wish to reclaim our rightful place as compleat healers, and use all the colors on our palette, we then need to reclaim the time we need to give us and our patients the necessary space to develop the relationships that will allow us to once again use the art as well as the science.

While changing our language won't totally turn things around, it's a start. We need to correct those well-meaning people who refer to patients as clients, and we need refuse to deal with the insurers and bureaucrats who refer to us as Healthcare Providers. Until we can change the definitions under which we operate–again to reclaim the title "physician" and "doctor"--- until *we* can control the terms we use in the debate, we'll never be able to elevate the Art to the level of the Science.

Notes:

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