

DOCTOR, WHO IS YOUR PERSONAL PHYSICIAN?

by I. Michael Kaufmann
Director, OMA Physician Health Program

"Who is your personal physician?"

This simple question is one of the first asked of a patient who might visit any emergency department or walk-in clinic for medical care. And, usually, the patient is able to answer with the name of a doctor. Can you?

Doctors suffer from stress-related problems, physical ailments and all types of human problems, just as everyone else does. But do we have proper access to health care? Sometimes we deny symptoms we may experience, or delay addressing them. We don't like being patients, and we don't always know where to turn when we do need medical care.

Many years ago while I was still in active medical practice, I was scheduled to be on night duty in our hospital emergency department. My upper respiratory infection had become lower, and I was the proud possessor of a chest full of rhonchi. Fascinated by the sound as I auscultated myself in the hospital corridor, I called over a senior colleague to listen as well. He did, then walked on, heedless to my plight. Not that my plight was a case of untreated bronchitis, but that I was facing a night in the ER when I felt myself to be sicker than the average walk-in patient. Did I call my own doctor? I didn't have one. Did I go to the ER myself? Never even considered it. Did I work that night? You bet...

shivering, sweating and hacking up great wads of phlegm in the process. I had my sense of heroic contribution to the health of my community as consolation.

Do you have a family doctor? And if you do, do you actually turn to him or her for medical treatment? An Israeli study, examining the care of family physicians and their families, reported that two-thirds of interviewed physicians did not have regular personal physicians, and doctors who suffered from chronic diseases were even less likely to be treated than "healthy" ones.¹ An Australian study reported that only 42 per cent of doctors surveyed had a general practitioner, and less than a third ever consulted a GP if they had a medical problem.² Are Canadian doctors so different? Certainly the majority of doctors calling the Physician Health Program reveal they, too, have no family doctor.

Is the colleague you meet in the corridor your "personal physician," at least for the moment? I wonder if he keeps careful records of the medications he might prescribe for the conditions he treats for you. Does he know your medical history? Do I need to go on?

Are you your own physician? The latter study reported that 76 per cent of respondent physicians had self-prescribed antibiotics. Fifty-five per cent of the female physicians of

reproductive age had self-prescribed oral contraceptives. Doctors give themselves replacement hormones, lipid-lowering agents and other cardiac preparations, anti-hypertensives, anti-depressants, and, of course, all manner of analgesics, including prescription strength opioids. The risks associated with these latter drugs, as well as other mood-altering drugs, are well known.

I have a family doctor now. I appreciate that I may not always be an easy patient, and that sometimes I may try to influence my own care, but is that so bad? My doctor listens, considers and reviews our options, and advises me. Just like a real doctor. And I'm just like a real patient. I receive all the advantages of the good health care our system offers. My wife sees the same physician. We're just like a real family that way.

Sometimes it takes awhile to find a doctor willing to treat you like a genuine patient, but it's worth it. OMR

References

1. Rennert M, Hagoel L, Epstein L, Shifroni G. The care of family physicians and their families: a study of health and help-seeking behavior. *Family Practice* 1990;7(2):96-99.
2. Pullen D, Lonie CE, Lyle DM, Cam DE, Doughty MV. Medical care of doctors. *The Medical Journal of Australia* 1995; Vol 162: 481-2.