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Letter to Editor

A Very Wrong Prognosis

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When one works alongside of doctors, especially general practitioners, it is certainly not rare to hear them describe some patients or their relatives as complaining about what opinion or treatment has been offered. To some extent, this is an 'occupational hazard' in medicine and related fields despite the level and competency of the practitioner or the appropriateness of the action undertaken, even on the basis of only one consultation. When this occurs, it may leave the doctor or an associate in an allied field with a sense of injustice, possibly made worse by the pressures and responsibilities that 'go with the job'.

By way of example, during my past employment as an NHS psychologist I was asked to assess a 14-year-old boy whose parents were desperate. He was about to be expelled from school for bullying and smoking in the corridor. He also started stealing from the local shops. He had no respect for adults, including his teachers. As might be expected, he was eventually seen at the local surgery. But despite an extended 30 min consultation, he just sat there and refused to speak to the family GP who decided that a referral to Yours Truly was in order.

After taking his developmental and misbehaving history from Mum while Dad kept telling him to sit up instead of 'smirking and slouching', I asked him if he would like to see me on his own. Surprisingly, he agreed which made me think I was getting somewhere. But, my optimism was short lived, since he then said very little, either spontaneously or even when prompted. All I managed to extract was his wanting to be left alone and for everyone to 'get off my back', intermixed with a host of foul expletives.

At that point it seemed sensible not to push things any further. The only sign of optimism was his muttering 'I'll think about it' when offered another appointment, leaving me feeling it was only a matter of time before the Social Services and the police were involved. My prognosis was no better than guarded to poor if past behavior was anything to go by.

For the next few weeks I heard nothing further from his parents, although I once caught sight of him in a nearby super market, with the security guard giving him suspicious glances. But soon after I received a letter from his mother, informing me that their son had started attending school, had stopped his smoking and bullying and had otherwise improved all rounds. The letter ended with heaps of gratitude for all I 'had done' for him when they were at their wits end.

Although I smiled when reading this accolade, I knew it was not deserved since I not only failed to make much headway with young sir, but predicted he would be in more trouble before very long. Fortunately, I was wrong and badly wrong at that, albeit with a greatly enhanced reputation of being 'wonderful' as far as his parents were concerned.

Although I felt a little guilt over this glowing praise, this was soon counter balanced by recalling heaps of criticism in other cases, when I felt that despite my having been right from a clinical standpoint, both the patients or their relatives thought very much the opposite.

I suppose it all boils down to receiving credit when it's totally unwarranted, since sometimes we are mistakenly blamed for the poorest of reasons. Still, in the health care game as in the rest of life, it is probably no great sin, at least on occasion, to let those who seek our help believe how clever we are, even if only by way of good fortune however defined.