

On the Other Side of the Counter.....? (A note on an untouched aspect of the Doctor-Patient relationship)

N.K. Mehta , Anuradha Advani

Old age is a stage of life when a person comes on to find himself, to use a metaphor, ‘..on the other side of the counter’. Yes-on the other of the counter, Sir-‘while on this side’ of it is the person who happens to be his much needed person supposed to deal with the said old man’s age-problems, his ailments, his diseases—in other words, his doctor, his physician, the remover of his agony, almost his ‘God’ at the moment, his everything,. Obviously, the doctor is in a dominant/ authoritarian position, as is usually the case with all consultancy relationships.

The phrase ‘deal with’ here is important. Yes, the doctor has to deal with this old man, he has to handle, he has to talk to him, he has to communicate, he has often to give instructions in the course of treatment and examination. These instructions are given verbally. The word of doctor’s mouth and the tone here become important. The accompanying facial expression or the gestures also become important, for it is through these, initially & primarily that the doctor's disposition and behavior are judged by the patient who watches him to decide **How much ‘God’- his ‘god’-the doctor really is.**

In this delicate relationship that hangs by the thin thread of faith and confidence and competence the behavioral tenor of the doctor becomes an important ingredient of the professional outfit and conduct of the doctor on the one hand, and the crux of the doctor-patient relationship, on the other.

The doctor wins the 50% of the professional battle by his behavior, good behavior, sweet behavior, and the rest 50% he may win on account of his professional competence.

Let's straightaway submit with due respect that the behavior pattern of the doctor in respect of the old and the aged, which ought to be of a very high order, quite often suffers from serious inconsiderateness and offensive discourtesy and betrays lack of patience, lack of understanding of the state of ‘human material’ the aged client is in,

lack of respect for age, respect for the dignity and the ego of the aged.

It is painful to see old patients being treated shabbily, roughly and indifferently in the course of their examination. Ordinarily, courtesies are seen to be thrown to winds. Scant respect is shown to age. This is contrary to our socio-cultural norms. Politeness/sweetness in manners, in communication is missing. Patience is sacrificed at the altar of undue haste and sick hurry. Sometimes instructions coming from the doctor’s mouth are vague, hasty and rough and couched in a very authoritative tone and in impolite manner. The doctors fail to address these elders gently. The human touch in the tone and tenor and the language they used is missing. The way some doctors address their patients sounds as if they are in a police barrack.

There are several examples to show how in fact the patient is roughly addressed/ instructed and what really is expected/ is culturally desirable.

Agreed that the doctor is in a hurry ; that he is too busy; that he has to look to other patients also. Yet he forgets as to who he is dealing with. The person who he is dealing with is physically weak, mentally less poised, emotionally upset, confused and not sure of himself. May be he cannot listen too well, his reflexes have become slow etc. etc. Therefore, while dealing with such patients, due consideration and concern should be shown by the doctor.

Sometimes the doctor assumes that the patient knows the entire procedure/process already-when he is taken inside a room for a ‘test’. The fact is that he just does not know what he is expected to do inside the room, with the result that he behaves strangely and invites the wrath of the doctor and his subordinate staff for his absent mindedness.

Again, the doctor forgets that the old people too have their honour, their dignity and their ego too.

The doctor doesn't recognize his aged-patient's 'once upon a time- feeling' which becomes strong on such occasions. May be 'once open a time' the present aged patient was a big army man, or a high up in administration, or a fast track runner, or a very senior huge judge having grand-children of his novice doctor's age. When such a patient is treated or behaved with rather not-too well or treated shabbily, then the old man's ego rises up and finds itself hurt and bruised and he seems to be say 'What do you know, young doc, Once upon a

time I was.....' But to-day is another day, which is his woe.

The moral of what we have discussed above is that the professional code demands that the aged deserve a more considerate and courteous deal at the hands of their doctors who luckily happen to be 'on this side of the counter'.

Let's highlight this point in the various seminars of workshops that are held for doctors more particularly these that are held in connection with the Geriatrics- problems.