

70% something

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What is negligence, by a doctor ? What is good practice, by a doctor ? What act of doctor causes concern in a patient and his relatives ? What is the reason for patients not getting well, when they should and could ? And what is the cause of cancers getting diagnosed, more often at a later stage ? Have you ever wondered ? Is it ignorance of the patient? Yes. Is it ignorance of the doctor. ? Yes.

Do you know that most of the diseases including hypertension, diabetes , heart disease and cancer are manageable , if not treatable , if diagnosed in time.

What causes late diagnosis ?

I have vaguely pondered on these things.
Yes the patient's ignorance and distrust of doctors is one cause. Surely. He doesn't come to the doctor. He doesn't follow the treatment plan. He doesn't follow the doctors advice. He is lost to follow up ! Yes!

Why?

Lack of doctor -patient trust in current times is one big factor. But that is not what I want to talk about, here. And now.

What I want to ponder on here is what can be called doctor's illiteracy or ignorance or fallibility.

Do you remember when most disciplines follow 35% limit as pass percent limit, the medical line follows 50% as pass percent cutoff. We have to score 50 % to get a pass. At 70% we are gold medalist. Of course we have to answer almost 100% to score 70%. But does the little part left behind after "almost" matter? Yes. I certainly think so. The world is asking us to be infallible.. We have to pocket that little bit, left after almost. To score 100% not 70%.

To go on further about it ...

A hypertensive comes to me. I know dose of calcium channel blocker, and the dose of ace inhibitor and the dose of beta blocker and the interaction of this particular calcium channel blocker with that ace inhibitor (sums to 90%, doesn't it ?) But I can't titrate the dose of this calcium channel blocker with that ace inhibitor. Am I in soup? Yes. I am.

I have to be infallible.

A patient comes to me. White patch in mouth. I prescribe antifungals, do cbc, do HIV testing, do peripheral smear, do follow up (90 %?) And don't do imprint cytology. Am I in soup ? Yes. I have to be infallible.

A breast biopsy is sent to me. I see it. I scan the whole slide. I check architecture, cell morphology, nuclear features, mucin, types of cells, polymorphism and overlook one duct filled with cells ! Am I in soup ? Yes. I have to be infallible.

All this bad resulting I blame on getting 70%. Even with 1% ignorance or score we can hurt the patient. What is demanded of us is tough. Very tough, given our mistrust relation with patients. But somehow we have to ace the little bit left after" almost".

We have to be knowledgeable, and infallible.
And more important, build trust with patients.

Can we do it ? Can we know 100%? Can we take on the onus that lies on us. By ordering tests where required. By being more vigilant. By referring where required.

Can we ?
This is being asked of us.
