Words of Wisdom

**Compiled by
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Continuing from where it was left at the A. O. I. Golden Jubilee conference at New Delhi it is endeavoured to tackle this subject further for the benefit of readership of our journal. Attempt is made to find practical solutions to the problems faced by both old and new apprentices in our fold during their career. We are all taught through post-graduate teaching, workshop, CME about surgical techniques. We are also taught about voluminous research and theories that go with it. What we are not taught and we toil and sweat to learn it the hard way is "Words of Wisdom".

A practical situation is created where in there could be problems of ethics, education, research, surgical failures and so on. We have sought for this column "WORDS OF WISDOM" with years of experience in teaching and non-teaching institutions. We have then put forth some views on the issue. As this is the beginning of a new column we earnestly request our readership to participate and enable us to enter into a territory which had been considered as taboo. High in roads could be made for the smooth sailing of our juniors in these hostile terrain of clinical practice where angles fear to trade.

Clinical situation with ethical dilemma is created thus.

At the end of routine consultation, you have advised surgical treatment to your patient. At this point of time your patient produced papers of earlier consultations which have advised against such surgical treatment.

= Other consultant is senior to you.

= Other consultant is junior to you.

= Other consultant is unknown to you.

= may be there is totally different working / institutional infrastructural back up.

How do you cope with this ?

It has been my experience that patients coming to me now are for second opinion or revision surgery if necessary. My opinion for surgery is based on detailed clinical history corroborated on critical evaluation of routine and special investigations relevant to the case which is either chronic disease or malignancy. My advice for surgery is from multi disciplinary point of view with infrastructural set up and technological back up followed by me.

It has been my practice to discuss about the disease with the patient and his relatives and clarify all their queries and doubts. The other modalities of management if are prolonged, likely to exacerbate and without any guarantee of cure it would be prudent to opt for surgery if it is safe. It avoids uncertainty, mental tension and is cost effective in the long run. Safety of the operation and cost factor are important factors from patient's point of view.

My advice for or against surgery would not be influenced by previous opinion of my colleagues either senior, junior or unknown to me.

Dr. N. K. Apte – Mumbai

The problem situation that you have posed is, unfortunately, not too uncommon in any practice.

My approach to this situation is fairly straight forward. I tell the patient that it is possible for different surgeons to have more than one approach to treating a problem and that my approach in this particular instance would be surgical. I would also say, that, this is the approach that has worked in my hands and the ball was now in the patient's court and that it was up to him to decide whose recommendation he has to follow.

It is however, worth bearing one or two points in mind. The very fact that this patient has gone "shopping" all over the place and has hidden his previous consultations from me would indicate, that this person is less than forth-right. I would be wary of this person.

Dr. Mohan Kameswaran, Chennai.

My answer will be same in all situations whether the earlier consultant is senior, junior, or unknown to me.

I will explain the patient that I have examined you; today and as per clinical findings you need a surgical treatment. This is my opinion after through study of your problem.

Further I will tell the patient that I would have advised surgery in similar situations even to my close relatives as it is indicated.

I will totally avoid untowards remarks towards our own colleague (Consultant) as clinical findings and situation may be different when he has seen the patient.

Dr. V. B. Chitale, Pune.

You may have your own ways of handling this situation. Please interact with us freely and encourage us by your active co-operation in seeking and spreading " Words of Wisdom"

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