

Treating the whole patient

Good doctors consider personal, family history

Dr. Davidicus Wong, Special to Vancouver Courier

Published: Friday, February 06, 2009

This week, my wife noted that I don't always write about medicine, at least not like other medical columnists. I could write about the disease of the week and how doctors would manage it, without digressing into the emotional, cognitive and interpersonal aspects of real life.

But that's not how we really live and not how I practise medicine. Some doctors focus on disease as it presents in each patient's shopping list of symptoms and concerns. They hardly have time to think about prevention, the early detection of disease and the proactive management of chronic health conditions.

Good doctors take the time to consider their patients' personal and family health histories, and advise them on appropriate preventive and screening measures even if they come into the office for other reasons. Great doctors engage their patients in proactively managing their chronic health conditions, such as diabetes, high blood pressure, kidney disease and heart disease, to reduce their risks for progression and complications.

The best doctors do all of the above but see in deeper dimensions and treat the whole person. Health conditions are perceived in the context of a complete and unique life. The same situation has a different meaning to each individual.

During the 10 years I consulted in hospital ethics, I noted the problems of too narrow a focus on acute medical problems. I would be asked to assist in families' decision-making when their loved ones were already in the intensive care unit, supported by machines for fluids, feeding and breathing.

A common scenario is the senior who is brought to the ER after a severe stroke. He cannot drink or swallow so an IV is started. Soon after, a feeding tube is added. While in hospital, he acquires pneumonia, goes into respiratory distress and requires machine ventilation. He deteriorates, and the family is asked to make decisions about withdrawing the feeding tube, ventilator and IV, which might have been interventions the patient would have refused had he been capable of expressing his own wishes.

In the same medical situations, individuals would make different decisions based on where they find meaning and quality in life. If they thought about it ahead of time, some would want CPR but some would decline. The road to hell (for example, ICU) is paved with clinical practice guidelines. The best decisions are based not only on the medical situation but more importantly, on the individual's preferences and life values.

This is the art of medicine. It requires the physician to be a scientist, teacher and artist. As scientists, we apply the evolving knowledge, skills and resources of medicine. As teachers, we connect, communicate and educate this information to our patients. As artists, we help our patients find the best creative solutions on the canvas of their unique lives.

The goal, as always, is to assist individuals in achieving their positive potentials. It may be in coping with the current stressors that occupy their lives' interpersonal conflict, troubled teens, a new diagnosis of cancer or chronic condition, acute illness or injuries. It may be in looking at the big picture, finding meaning in each day and seeking balance in the important areas of our lives.

On Feb. 8, Dr. Wong presents a workshop on Achieving Your Positive Potential for Health at The Wellness Show at the Vancouver Convention & Exhibition Centre.

Dr. Wong is a family physician.