

A day in the life

Dr David Zigmond

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Man Overboard!

A brief autobiographical cross-section

Age. 68

Role. Physician in Psychological Medicine, large Teaching Hospital.

Place of Work. Small inner-London practice. Principal GP, 37 years.

Hours Worked per Week. 45-50.

Best thing about your job. Personal engagement with humanity's breadth and depth. Making imaginative and healing sense of the unobvious.

Worst thing about your job. The destruction of the above. The ever-increasing managerial systems that look neat and tidy, but cannot engage with human complexity and intelligent discrimination.

07.15 hrs. The alarm clock diverts my deeply troubled unconscious. My hind-brain automates: essential ablutions, then dressing. Down the stairs: my higher functions awaken. High-fibre breakfast: I believe some of my propaganda.

08.15 hrs. *Squadron Scramble!* I mount my large ancient Japanese motorcycle to rumble and growl across London to the hospital. I fear the Underground: its teeming, subterranean crush warns me of my mortality and insignificance. Above the earth's surface I am better able to deceive myself.

09.15 hrs. The hospital. A heroically retained small rump of a role I have had for 36 years. I am called 'Physician in Psychological Medicine', a quaint title redolent of vanishing values and perspectives: I do not now know of a similar designatee.

Here I provide experienced and flexible guided support to patients whose physicians think that their patients' long-term serious physical diseases (eg Diabetes, Asthma, Inflammatory Arthropathy or Bowel Disease) are substantially generated, exacerbated or amplified by emotional and life-problems. These people are usually not 'mentally ill' and they might not (yet) want more formal types of counselling.

Such people and their complaints are very common. But our increasingly diagnosis-centred systems cannot provide such holistic practice: that based on skills of experience and humanistic imagination. This is largely because these are inimical to our current imperatives to measurement, rapid trainings and mass-management. It is not just the word 'psychomatics' that is perishing: its home – the art and ethos of healing – has been lost to Occupying Forces: those of informatics, schemata and standardization.

I see patients in my long-tenured room, which I have turned into an inviting haven with kelims, plants and softly-lit, lush-coloured prints. This morning I have limited my list to three. I find all their stories and kindred problems engaging and affecting: 'the more you see of someone the more of someone you see'. Ah! Yes. But only to open hearts and minds.

I find my secretary in the harshly-lit, unloved catacombs of an Administration block. I dictate two letters to physicians long known to me.

My letters are professionally more personal than technical: from a person, to a person, about a person. I try to infuse clinical material with human meaning and understanding. I construct this through concise, precise – though imaginative – biography, narrative and portraiture. My physician-cohorts appreciate this: they tell me their contact with these ill and troubled people feels enlightened, enlivened and supported. 'We can't get this help anywhere else', they say. My sorrow far exceeds my pride: my colleagueial world used to be rich with such human resource.

13.00 hrs. Another long motorcycled traverse of London. A different part of my brain. To survive, events are all: deeper meaning must wait.

14.00 hrs. My least favourite slot: a locality CCG meeting in a stuffy, bedraggled, glaring room. Ours is a doomed project and we practitioners and managers are political prisoners. Outside this context I find my colleagues mostly amiable and able: here their energies become wooden, tired and soured.

This afternoon we are posited two institutionally defined and generated problems: a 'poorly performing' hospital 'Provider' and the ubiquitous and eternal A & E over-attendance. We approach these problems with a limping, sullen acquiescence. I attempt to incite my colleagues with some sharp and spirited defiance: 'We are conscripted hostages to a government's misdirected campaign, of marketisation and commodification. The problems are insoluble and amplified by the System ...' The Chairman attempts to quieten me: I quicken my struggle to (just) civilised limits. In the meeting people look away: on leaving, several signal furtive contact with me.

16.30 hrs. Back to my surgery. An 1830 Church. My room is like a big brother to that in the hospital: I want my conscious life to gaze upon objects of joyous expression and deliberation. My receptionist brings me hot tea and warm banter. Despite my decades of practice I still (mostly) am energised by my contact with those who want to see me. Every consultation is unique and unrepeatable; each is a microcosm, many a code for something else.

19.30 hrs. Supper with my son, then an old film at the BFI: *The Wizard of Oz*. The Lion's lost courage, the Scarecrow's lost thoughts, the Tin Man's lost heart, Dorothy's lost belonging. The four restitutions of healing.

22.30 hrs. Home. To bed and sleep. But I cannot: *Are my QOF points sub-optimal? Is my Professional Development Plan plausibly robust? What happens to Underperformers when they die?*

Eventually sleep takes me: I dream of restored youth and being a Bullfighter.

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