

# Cura Te Ipsum – Physician, Heal Thyself

wasn't on call and my bleep went off. I knew without looking that it was the directorate office. Immediately my heart sank, for these calls were always about bad things. They never called to say "well done Gwyn you're doing a swell job" or "just to let you know you can go home early today." This call was no exception. "One of the consultants is on sick leave today and has a clinic this afternoon. Can you cover?" It wasn't really a question but more of an order, as I learnt quickly that study leave sessions are routinely used to fill such gaps at the Large Teaching Hospital.

I covered the session and mentioned to a sandy haired colleague that I had to do so as it was an exceptional circumstance. Sickness. He guffawed. Who was sick? Ahhhh, yes. That happens a lot. He proudly stated that he never covered such sessions as sickness was rarely sickness in that hospital. As I watched him amble off to theatre I surmised that the number of years he had spent in the largest hospital on the rotation had jaded him and he was being unfairly cynical. How sad.

Shortly after that I became aware that another colleague had called in sick and the three-person clinic I was a part of every Wednesday in fact had a fourth member I had never seen as he was on long-term sickness absence. I had worked in other hospitals and seen people call in sick, people who were sometimes off for a while with serious conditions, but this seemed an entirely new level of sickness. As I found myself in a casualty clinic rammed with patients for two doctors in which I was the only doctor present, I had a call from management that the other doctor had called in sick with diarrhoea and they were roping in a doctor from study leave to cover the session. Diarrhoea and vomiting it seemed are rife in the capital city and a modern day John Snow was sorely needed to do some kind of epidemiological workup of the affected cases, curiously almost all NHS employees I would imagine, to find the equivalent of the broad street pump and finally solve the problem.

But no such John Snow was forthcoming. One record breaking morning three registrars phoned in sick, two of which had been in work the day before and appeared,

to me at least, to be fine. The absolute chaos this caused had to be seen to be believed and the problem was so instantly catastrophic that an angry consultant demanded the third registrar come to work and would not take no for an answer. When he did arrive, obviously late as he was expecting a day off, for all intents and purposes he looked to me exactly the same as he always had done. I pondered that had I been in this humiliating position I might have tried to act out some kind of life-threatening disease, at least crawl into clinic on all fours or cough blood over every other patient. It would have surely been the only decent thing to do.

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Perhaps I am old and cynical beyond my years. Whenever anybody called in sick there were always horrifying consequences for those left behind. Management can never cancel enough patients – most are already on their way so the task is impossible. Patients would be angry, the nurses would be stressed dealing with queries, and the dreaded tannoy system would be used to announce the delays to a roomful of packed, overheated, exhausted patients who would then spend at least three minutes at the beginning of their consultation telling the hapless ophthalmologist off for having waited so long. We're a man down, you say. Someone is sick. But patients then stare back with eyes like steel. There is always somebody off sick, they reply. So, this being the case, surely nobody in their right mind would call in sick unless they absolutely had to, would they?

A consultant in another hospital used to

say "the beatings will continue until morale improves" whenever he heard about a new management initiative to curb sickness absence. Ironically, management itself is not immune it seems to this sickness epidemic, although the work they do so rarely seems to serve a useful function that the moral quandary over taking sick days as a manager must be much less. A neighbouring hospital had to suspend cataract operations for several weeks last year as seven out of eight assessment nurses were off sick. An ophthalmologist in a hospital a little further afield was on long-term sickness absence and rumour abounded that he had taken part in an Iron Man competition while on leave. I would imagine that a certain level of fitness would be needed for this, as if I took part in an Iron Man triathlon I am confident I would need to be cardioverted long before I reached the marathon stage.

I am unsure what to make of this. Some kind of moral contract between doctor and patient has broken down and while some may argue that it is the fault of the health board or management in some nebulous way, it is the patients and our colleagues that suffer. Unless it does turn out that Wales has an unusually dirty water supply or an unprecedented number of salmonella-inducing eateries. In which case, as I have been oddly unaffected, I may enter myself into the next Bowels of Steel competition.

## SECTION EDITOR



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