Rite of passage

he Lakota Sioux people of Dakota have one of the best preserved Native American cultures in the United States and when people think of the 'American Indian' it is to the culture of the Lakota Sioux that people mostly turn. The feathered headdress, the dancing, the fierce warrior spirit and the vision quest. Of these, it is the vision quest that is the most interesting. Basically, it is a ritual in which adolescent boys from the tribe journey away from their kith and kin, into the wilderness, to return approximately four days later. They are to be offered no support, given no provisions, no weapons and during those four days are not to return to camp and neither must anyone seek them out.

When they return, or perhaps should they return, as the wilderness of the Great Plains of America has swollen many lost travellers in its time, the boys return as men. A spiritual transition has occurred in which the boys are meant to have communed with the gods and only then can they occupy their new position in society. In fact, those that fail to do this journey are not given an equal status and have great difficulty in getting married and performing other social functions. Whether they do commune with gods is largely immaterial as it seems to be the process of separation for a specified length of time followed by a joyous reunion that allows their enhanced societal status. I believe other cultures such as the Spartans had this ritual too, in various forms. I am basing this mainly on having seen the film 300 in which as a boy King Leonidas is tasked with surviving a spell in the cruel wilderness attacked by wild beasts and famously killing a wolf through cunning and brute strength.

You may already know where I'm going with this. If you practise

ophthalmology in the United Kingdom you will. I trained in ophthalmology in Wales and want to practise as a consultant in Wales. I was an SHO, a registrar and did my TSC in ophthalmology in Wales. In fact, many consultants working in our specialty in Wales also trained on our rotation. Perhaps it is because of this that they too went on their own vision quests prior to taking up posts as consultants. Almost all of them, in fact. I don't know anyone who stayed and made the final transition from senior registrar to consultant and never crossed the border. Where did they go? Where do British ophthalmologists go to commune with the gods and come back transformed? To Moorfields.

Well, being truthful, going to Moorfields is not the only place an ophthalmologist can go to transition into a fully grown man with all the rights and responsibilities that entails. There are many other very well qualified places that offer excellent fellowship programmes. Places such as Manchester, Bristol and Liverpool. There is no specifically defined place the Lakota Sioux people need to go to perform their own quests, although Wikipedia tells me that the favoured place is Spotted Eagle Mountain near the headwaters of Badger Creek. So perhaps Moorfields is Spotted Eagle Mountain and the small drainage culvert that runs outside its accident and emergency is Badger Creek.

My mentor, an intelligent, thoughtful medical retinal specialist working in the Royal Gwent Hospital in Newport, recommended that I go there to do my fellowship as he himself had done. He also recommended very much against transitioning straight from registrar to consultant within the deanery as this would not result in the necessary gravitas being achieved and perhaps, like the disenfranchised Sioux adolescent, I would be forever a

boy and never a man. He did not say it like this, of course. He actually never mentioned any Native Americans at all.

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able to see more pathology there than if I stayed in Cardiff. I questioned whether I would learn anything more. I questioned whether my cataract skills would crumble to nothing if I did a fellowship in medical retina for a year with no operating lists at all. To be fair to him he had an answer to all my questions. He told me the pathology was likely to be more interesting, I would not lose my cataract skills and I would learn a lot. But all this seemed to be possibly a secondary aim. The learning and the pathology were in some ways like communing with Sioux gods; it was nice if it happened but it was not essential to the transition taking place. Most Sioux youngsters never end up communing with any gods during their journey it seems. Less than a third, according to an article I found on Google.

On the day of the interview I got to Moorfields early so that I could look around the hospital. I didn't think it would help in the interview but I wanted to get the feel of the place that so many of my elders in Welsh

ophthalmology had been before me. I crossed the sacred drain and climbed Spotted Eagle Mountain, at least as far as the clinical training centre. There were numerous paintings, line drawings and even caricatures of past professors and eminent surgeons and lecturers on the walls hardly any of whom I recognised. A tall chap busied past me that I thought I recognised from some course or conference somewhere, though that could have been an illusion. I sat in the glaucoma clinic seating area for a few minutes to contemplate life, as it seemed were many hundreds of others at that moment.

Lastly, I entered the Friends of Moorfields shop. This is a small shop staffed by volunteers selling coke and chocolate to those attending clinic. Then I saw it. A sacred symbol crafted by devotees to the unknowable majesty of that place, copied and placed up for sale in vast quantities for pilgrims and travellers to buy. A Moorfields hospital tea towel gift set, emblazoned with its holy peacock with wings outstretched. Only then did I know for certain that I would come to this place. And so I headed across to the suite of rooms where I would have the interview, tea towel in hand and the spirits of my warrior ancestors talking all at once and jostling for space in my head, while I made plans to prepare for my own vision quest.

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