

Focus

A Toast to doctor health

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All doctors are expected to be concerned for the health of those who seek their advice. In the past this has mostly been after the onset of disease rather than before, although latterly we have recognised the importance of prevention such as exercise, diet and avoidance of smoking or excessive indulgence in alcohol and other potentially dangerous drugs.

Unfortunately, doctors in the past have frequently been so concerned with their patients that they have neglected themselves and sometimes their families. Such neglect can impinge on health directly, or indirectly through family dysfunction. Often overlooked is the insidious onset of burnout, which can have a profound influence on our ability to function as caring and compassionate practitioners.

Burnout is particularly likely in those who give much of themselves, those who are asked to perform tasks outside their area of competence and those who get little positive feedback from those they serve. To be effective as medical practitioners we have to give of ourselves and exhibit a measure of emotional involvement with our patients. The real difficulty is in knowing how much to give and to recognise when our involvement becomes too much of an emotional drain upon us.

Is your lifestyle healthy?

Little or no education in achieving a healthy lifestyle has been provided by our medical schools and all too often doctors make the mistake of trying to treat their own illnesses, sometimes abetted by corridor consultations with colleagues.

It is to be hoped that this is changing. In a study¹ I conducted a few years ago, 71 per cent of respondents from a random selection of New Zealand doctors indicated they had a family doctor. This means, of course, that almost 30 per cent did not, and of those who had a family doctor only 11 per cent attended for asymptomatic checks.

What was pleasing was that fewer than 7 per cent of doctors smoked and most of those only indulged occasionally. Most doctors characterised themselves as light drinkers. Sixteen per cent had a BMI over 27 and so could be classed as overweight. Almost 6 per cent of

females and 8 per cent of males got almost no exercise; 49 per cent of females and almost 9 per cent of males got occasional exercise; and 34 per cent of both females and males said they got at least half an hour of vigorous exercise three or four times a week, as is recommended. There were still too many doctors prescribing for themselves.

Clearly these figures could be improved, and as well as agreeing with Juvenal, "A sound mind in a sound body", – I believe we have a responsibility to be an example to our patients.

One of the agencies available to the profession is the Doctors' Health Advisory Service (DHAS) and this issue of the *Family Physician* outlines the role that it can play in ensuring the profession gets appropriate assistance when or before illness strikes. It is very desirable that, if doctors themselves, family, friends, colleagues or patients sense that a doctor has a problem or is at risk of developing one, they contact the service early. Too often it is seen as a last resort designed to mitigate the strictures of the Medical Council.

DHAS has taken an increasing interest in the area of health promotion as well as the management of existing conditions, and has published *In Sickness and in Health*, available for \$18, from the DHAS, PO Box 812, Wellington.

References available on request.