



The swamp is unarguably heavy going underfoot, but also makes its contribution to the rarefied air above, at times rising to great heights. International travellers, a very tolerant and determined if ageing breed, have recently been further inconvenienced by restrictions on their toiletries, pastes, potions and, on occasion, medications. In a twilight slumber, an airborne practitioner high above the Hindu Kush was gently roused by a smiling Asian girl. She informed the practitioner that swamp vapours had overcome an elderly female en route to Australia. This senior traveller had collapsed outside the toilet facility. Fortunately the good lady had rapidly responded to the 'great way to fly' airline crew so something like a general practitioner interview was able to back up their attention.

The lady turned out to be an experienced patient claiming to have

been in hospital five times in the last six weeks and listed among her health problems asthma, diabetes, heart and arthritis! She had no medication, prescription chart, management plan or relevant health information on her person. All her medication, probably unintentionally, had been transferred with her luggage to the hold of the aircraft. At this point the good intentions of airport security were not fully appreciated by the airborne practitioner.

A useful selection of medical equipment provided by the attentive cabin staff enabled all important parameters to be measured and subsequently monitored. Patient anxiety about the absence of her medication 'to be taken regularly' was managed as above and on landing at the Lion State, a smiling lady in hat and coat, walked off the plane unaided.

This is a column written from the swamp. The term is taken from the book by Donald Schon¹ where he talks about the crisis of confidence in professional knowledge thus:

In the varied topography of professional practice, there is a high, hard ground overlooking a swamp. On the high ground, manageable problems lend themselves to solution through the application of research-based theory and technique. In the swampy lowland, messy, confusing problems defy technical solutions.

1. Schon DA. Educating the reflective practitioner. Jossey-Bass Publishers 1990.

Contributions

We invite amusing contributions to this column which should be relevant to the swamp and not more than 600 words.

Effective teaching

"What we should seek to instil in our colleagues is not so much learning as the spirit of learning" (Woodrow Wilson). It is well worth remembering that little of the factual knowledge we convey to our pupils is actually retained. Thus, if we can convey enthusiasm for the process of learning – the thought, research, and investigation – then we have met an important educational objective. The process of how we learn as physicians eclipses and surpasses the content of any factual data.'

Orientele E Jr. Ten tips for effective teaching. Fam Med 1998; 30(5):326-7.