

# Editorial

## Hounded by head lines, GPs must take a stand

***Tessa Turnbull, editor and KatiKati GP***

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Health headlines have been shrieking at us recently from radio, television and newspapers. Not least because health issues are always poignantly significant in election year. Just about everyone will offer an opinion at the very least about Lyprinol and other alternate health treatments, rundown public hospital services or the lowering of the drinking age to 18 years. Chatting to patients at the end of a consultation or to lighten the mood during a procedure leaves no doubt about how these issues are viewed in the public arena.

Many recent headlines have had particular significance for GPs. How about these two from the same issue and almost adjacent in our local paper. GPs ASKED TO NAG SMOKERS tops an article about the recently released smoking guidelines. The National Health Committee requests that GPs prevail their smoking patients to quit "at nearly every encounter". This assumes most of us don't do this already, despite our appreciation that smokers, like teenagers, view nagging with a mix of suspicion and disdain.

WORKLOAD, STRESS MAY SEE GPs GO details Tony Dowell's research findings that up to 50 per cent of GPs were considering quitting and 30 per cent of doctors were psychologically stressed compared with 10 per cent of the public. Probably not news to most of us weighed down as we are with a hefty paper overload at almost every consultation. As I write out three copies of the same information, just to order an x-ray at the local hospital (the despised ACC form itself asks me to identify myself three different ways), my stress levels inevitably rise.

Computer overload only adds to this. Our records must have sufficient detail to hold up to a medicolegal challenge. At the same time, consultation coding, theoretically reducing the amount of detail needed but alone offering little insight into patient encounters, is also requested.

The same newspaper shows other GP related headlines as well. GP SUBSIDY TO GO and ELDERLY URGED TO LINE UP FOR FREE FLU JABS leap out at me. Recent publicity has also centred around New Zealand's low immunisation rates and the meningitis and pertussis epidemics.

The new driving licence requirements hit the headlines a while ago and make me ponder over New Zealanders' famed fortitude. Why are we still putting up with this bureaucratic mess? Many unhappy people turn up in our surgeries with normal eyesight having failed the compulsory licence test, and recently I found myself in the same plight. Private health information is made very public in the compulsory forms. In our small town, the queues to make a licence application are still two to three hours long – similar to most other outlets. There is no facility for elderly people to take the driving test locally, forcing them to drive to other towns some distance away. This is right out of the reality of many elderly people who often have a familiar and well-driven local circuit that avoids night driving and peak traffic

times. At least the proposed amendments for a restricted licence will validate this reality.

It seems to me that, in view of all the recent headlines relating to general practice, the driving licence regulations are an issue about which we should be sending some flak back to politicians on behalf of our long suffering patients.