

There is No Question But That This Message -- Listen to What the Patient Tells You -- Is the Most Important Thing I Carried Away From Our Medical School

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Donald Hunton served his internship and residency training at Strong Memorial Hospital, and following two year's service as medical officer in the U.S. Air Force, he received fellowship training in Gastroenterology at the Mayo Clinic. He practiced internal medicine and gastroenterology in Cheyenne, WY, until his retirement in 1992. In retirement he continues to serve on several state and professional review panels and is a member of the Board of Directors of the University of Wyoming Foundation.

I paraphrase Charles Dickens. "Medical practice has changed to begin with. There is no doubt whatsoever about that". But I have hope that, unlike Marley, the foundation of medicine, the doctor-patient relationship is not dead, and should not have changed at all.

I saw a recent television program during which an enormously important exchange occurred between two participants who were discussing doctors, patients, and the relationships, which are most important. What made this exchange so important was the obvious fact that the discussants perceived this as a new discovery previously unknown in our culture. They said that what helps patients the very most is talking with their doctor; that what these patients most wanted was for the doctor to listen to them, and finally what most helped the doctor was listening to what the patient had to say. When I heard this I didn't know whether to cry out with alarm or to chuckle with satisfaction.

As I write this in December of 1996, I realize that I began learning of these concepts from Professor John Romano 46 years ago -- hardly a 1996 revolution! I continued learning from Professor George Engel and from all those influenced by these two giants until I finally left Strong Memorial Hospital in the summer of 1958. For me, this fundamental of medical practice did not change. Certainly it is almost correct to say that after ten years everything I was taught was obsolete. If it has been stuffed into a closet, the closet door needs to be opened again.

I know that it is stuffed in a closet by many practitioners, with diverse arguments presented as to why this is or ought to be: the overwhelming advance of technology; the demands on the practitioner's time; acquisitiveness and greed on the part of physicians; too much management of care; unwillingness to pay for cognitive services; too much information to be absorbed; and even the idea that this is medicine from an irrelevant horse and buggy era. These are all offered as explanations or excuses depending on one's vantage point.

I'm rarely around Strong Memorial Hospital anymore and I wonder if this doctrine is stuffed into some closet on Ward Y5. I hope it is not.

As I prepared to leave practice I steered a great many patients to a new physician. The patients clearly believed this was my responsibility and it was. In our group of eleven only one other went to medical school at Rochester. He was the next oldest, had too many patients already, and we both hoped that the young members of the group would absorb my practice. But one day I went to him and said that there were many people who just could not get along unless they had a physician who really understood what I'm talking about here. He said he understood, so we agreed that the other nine superb physicians did not have the aura of Romano and Engel, and so he now cares for all of these folks.

There is no question but that this message -- listen to what the patient tells you -- is the most important thing I carried away from our medical school. It can be taught everywhere as soon as teachers realize that it must be.