

Doctor, doctor

An appreciation of the medical profession

Andrew Borg Cardona

My first encounter with a gentleman of the medical persuasion, apart from the obs and/or gynae who, untimely or otherwise, ripped me, was with Prof. Charles Zahra Neumann, our family doctor known, presumably in an effort to make him less terrifying, as “Uncle Charlie”. Whether he actually was a Prof. or not is buried in the mists of time, as is his real demeanour, but in my memory, he was a cuddly old bear who made up for wielding a syringe – as doctors tend to do when in the vicinity of small children – by being a cuddly old bear.

Happily, my childhood was beset only by the ailments which normally beset childhood, the ones which generally cure themselves if left alone. They usually were left alone, the obsession which many parents now have for shovelling antibiotics into their offspring, an obsession that seems to be fuelled by certain GPs who believe in serving their fee-paying customers’ every desire, not being one with which my parents were afflicted.

It was about this time, during a course of treatment prompted by my having inflicted on myself some sort of skin ailment by swimming in the effluence that infested St George’s Bay back in the Sixties, that it was discovered that I was allergic to Penicillin. Luckily, my immediate propensity to catch those nasty social diseases that require a dose or two of the wonder drug was limited by my age, and anyway alternative weapons were already available.

Contact with the medical profession was consequently limited, over my developing years, to the gentlemen who toil at the coalfaces of dentistry and ophthalmology, and even then it was not an extensive contact. My teeth were – and remain – less than resplendent and not at all in the American style, and my eyesight is adequate, though advancing age has led to the usual deterioration that makes looking at things too closely a bit of a chore. My contact with these medical folk, therefore, was not such as to allow me to count them as representative of the *genus medicus* for the purposes of this piece, which is meant to be an appreciation of the profession from the point of view of one who militates in another profession.

My first real contact with the medical world proper came when I started my university education, though there were those,

mainly from the science side, who embraced the theory that my studying law and my getting an education were mutually exclusive. That being as it may be, it was on starting law that I came into contact with people who though not yet doctors would, the trials and tribulations of their examinations permitting, become exemplars of that species.

In the first couple of years, contact with the boys (mainly boys in those days, sadly) from the Faculty of Medicine & Surgery was quite extensive, as they had not yet migrated to the Medical School. They were, and remain, a fine bunch of lads, worthy opponents during the Rag Day events, events that generally involved the lugging of rotten eggs in the general direction of other students. I even recall an episode when one of our number, over whose identity a discreet veil shall be drawn, was kidnapped, no less. He was taken to the Dissection Labs, there to be inserted into a fridge and threatened with all manner of psychological harm. Lawyers, even fledgling ones, are made of sterner stuff, of course, and an escape was pulled off in the manner of Houdini at his best.

It is this sort of thing that gives rise to the friendly rivalry that exists between the two professions, with one trying to exterminate the other and the other trying to sue the one into oblivion. I exaggerate just a touch, of course, at least as far as Malta is concerned, because we haven’t yet reached the Americanised stratosphere when it comes to damages claims against the medical profession. Though they say they’d like to, no doctor of my acquaintance has actually killed a lawyer, either, even if our life style gives them plenty of opportunity for doing that little thing without even a soupcon of suspicion attaching itself to the attending physician.

Back then, some thirty years ago now, we were a small community at Tal-Qroqq and it was normal for groups of friends to be made up of medical students, budding architects, legal beagle puppies and sundry other professionals ‘*in utero*’. As a result, a good booze up would generally follow a sporting contest in which the University team would be made up of all manner of students. I don’t think that this is the case now and student life is all the poorer for it, even if at the time we used to lead each other to think that we’d like nothing more than to see the medicine course eliminated from the university budget, a sentiment that was reciprocated with vim and vigour.

Proof, if any was ever needed, that we actually loved each other to hell and back came in 1977 and following years, when the Government of the day decided, for reasons known only to itself and which space here does not allow me to go into, that a Jihad would be declared against the medical profession. Students from all faculties took to the barricades and tried to divert the

Andrew Borg-Cardona LL.D

He is married to Celia, nee’ Jaccarini, a pharmacist, and is a lawyer practising mainly in commercial and labour law, a lobbyist for the tobacco industry and a columnist for The Times under probably the most redundant of all pseudonyms *I.M. Beck*.

Government from its course, which was not the easiest of tasks. It turned out to be a battle which we lost in the short term, even if in the long term it was the Government that lost, losing the little respect it had at the time amongst the thinking classes and doing untold harm to the medical service.

At the time, on a personal level, I got myself even more embroiled with the medical profession, having become “romantically” (well, let’s call it that, even if those who know me will fall about laughing) involved with a pharmacist who would later marry me, whose father was a resultant exile of the 1977 Doctors’ Dispute (and who never got reinstated, notwithstanding promises made) and one of whose brothers left Malta to continue studying medicine and who ended up working as a doctor in Australia.

Interfacial action (contact, in non-impressive speak) with the medical profession tailed off after 1977, since most of my friends had sloped off to parts foreign in order to carry on with their studies. Contact was renewed when I was in London doing post-grad, and some good times were had, but the requirement to come back to Malta to start earning a living from the law intervened and the contact became somewhat tenuous.

On returning home, I started working in a field of law which restricted my interaction with the medical profession to examining the sick-notes some of them (not the majority, I hasten to add) seemed to draw up and issue as if they were going out of fashion. A bit like my own profession, it is sometimes difficult to resist the blandishments of one’s clients (and I use the word in lieu of patients deliberately) especially when one has, or wishes to have, the initials M and P after one’s name along with the Ls and the D or the M and the D.

Being human like everyone else, doctors have to balance their professional judgement with their personal requirements and sometimes it’s easier to say someone can have a couple of days off than to argue the toss with the rude mechanical cluttering up the pharmacy waiting area.

When it’s only a question of whether some sick leave should be taken in order to have time to go off and massacre a few birds, the issue is hardly world-shattering but greater professionalism is expected, and generally on view, when more important issues, such as the extent of an injury, are concerned. Sadly, just as there are lawyers whose espousal of a claim is indicative of its paucity, equally there are doctors whose certificate of disability is evidence that the percentage should be halved or quartered, along with the doctor concerned who should also be hung and drawn along with being quartered.

At least it has not yet come to pass that the practise of churning the clientele is anywhere near as prevalent in the medical as it is in the legal profession. Putting someone through an un-necessary court case is not as traumatic (except to the wallet) as going through an un-needed operation.

As my professional activities developed, so did my professional interaction with people of a medical bent. I have not gone into the business of medical malpractice suits, I am glad to say, and nor have I gone into the area of law that has me grilling a specialist on the stand to try to beat up (or down) a percentage disability or establish whether there is any injury at all in the first place. On the few occasions I have crossed

swords with a doctor under oath (him, not me) I have invariably found him or her to be courteous and professional, though I have to confess that some exponents of the art of curing people’s psyches do tend to seem to be a bit eager to accept that all depression is work related.

Closer interaction, which is a polite way of saying that we started having pitched battles, came about when I started representing the tobacco industry, that eternal bugbear of the medical profession (where would you be without it? I might ask if I were feeling facetious)

This particular activity of mine has led me down some interesting paths, I have to admit. Some doctors, whose professional detachment when faced with the perceived cause of disease rather than the victim thereof, deserts them, seem to feel unseemly glee in putting me and my arguments in defence of the industry in their place. Their glee transports them to the extent that they cite ailments of mine, ailments that I have made public, in support of their arguments. I am still somewhat bemused as to how my gall-stone attack and subsequent, and consequent, pancreatitis, were brought into the argument by one learned member of the medical profession, but such is life at the sharp end, I suppose.

My fun and games with gall stones and their consequences brought me into much closer personal contact with doctors of all sorts. Before this episode all of my own, we’d had a few brushes with medical issues of some pith and moment but they were not my issues directly, so I’ll leave them aside, other than to salute the doctors and nurses who took care of my loved ones with consummate skill and much success.

Prior to my gall stones imposing themselves on my consciousness, my only other medical intervention of any note was when my left lower arm, wrist and hand were stitched expertly back together after I decided to hang myself off a wall-hook during a game of golf. I would prefer to spare myself the embarrassment of further description of this, so you’ll forgive me for not going into the gory details.

It is tantamount to teaching my ancestors to suck eggs (even though I never did perceive any particular skill in this activity on my granny’s part) to describe what an attack of gall-stones feels like to an audience composed mainly of practitioners, so I’ll not even try. Suffice it to say, the three months or so over which the episode lasted, starting with acute indigestion (which is what it felt like) just before Xmas 2004, progressing through what threatened to be a heart-attack (and almost turned into one when the guy at the Mosta Polyclinic sent me off for an ECG) to culminate in full blown abdominal surgery (is that what you call it?) led me into what can only be described as an intimate relationship with the profession.

I have recorded, in less august pages than these, my appreciation of the professionalism displayed by everyone from the above-mentioned guy in the Polyclinic through the various specialists at St James’ and St Luke’s to my surgeon, who has only recently redeemed himself by allowing me a beer every so often.

The bottom line of this appreciation looms: it seems there is some use for the medical profession after all, notwithstanding the evidence provided by medical students.