



Back to the Basics of Medicine

by John Lavelle, DO



As we witness frustration and confusion surrounding health care, both within the political realm and within our daily practice, I realize how essential it is for us physicians to start getting back to the basics of medicine. We have slowly been losing the art of medicine, the physician-patient relationship and the ability to truly examine and bond with our patients. We have become lost in a medical world of test results, algorithms and computers.

I recently saw a patient for a second opinion of his low back pain and right leg weakness. He had been seen by six (6) other healthcare professionals over the past year from primary care physicians, urgent care providers, a spine specialist and a chiropractor. As I reviewed the patient's prior medical records, I saw his most recent evaluation documented full strength in the bilateral lower extremities including bilateral great toe extension. I found this interesting since the patient had a prior right metatarsal-phalangeal amputation many years ago and had clear weakness with right ankle dorsiflexion. Also during the examination the patient commented that he has never had such a thorough examine before and had never been asked extensive history questions. The patient had been seen by six (6) other clinicians, had multiple lumbar spine radiographs, lumbar magnetic resonance imaging and a nerve conduction velocity/electromyography study but never a thorough history and physical exam.

What has happened to our health care system that we no longer use our minds to assess a patient's gestalt and obtain a detailed history or use our hands to passionately diagnose? Why is that so many office visits or hospital rounds are centered around the computer and what the lab data reveals? Who decided that the best way to treat a patient was to see how they best fit into a certain algorithm or clinical pathway?

As early as medical school, students are losing the personal connection. Many schools are conducting classes via live streaming and video recordings. There is no longer a close interaction between medical students spending hours together in the classroom and library, developing relationships and sharing knowledge. This continues into the clinical rotations as students learn examination skills on simulators and history taking skills with pretend patients instead of being exposed to hospitals and speaking with actual patients with feelings and concerns. Furthermore, as new physicians begin practice, they are pushed to rapidly increase their collections and pressured to meet specific quality guidelines, instead of investing time on developing relationships with patients, colleagues and the community. Health care is moving away from patient care and becoming more focused on data points and diagnostic tests.

Too much of the advancement of medicine and the delivery of health care has moved the focus of physician's care away from the patient. Hippocrates, the father of medicine, believed *"it is far more important to know what person the disease has than what disease the person has."* Similarly, Dr. A.T. Still, the founder of osteopathic medicine, believed in making the patient the center of treatment. By taking the time to learn and know the patient, not just their complaint, and using his hands to diagnose and treat, Dr. Still's focus was to help patients maintain health. Josef Auenbrugger who founded percussion and Wilhelm Erb who popularized the muscle stretch reflex are examples of physicians who utilized their minds and hands to develop a personal connection with patients to more accurately diagnose and care for them.

It is time we look back to our early physicians and make sure we maintain a strong foundation in the basics of medicine as we move forward with new innovations. We should always strive to improve patient care, but remember to not lose sight of the patient.