

Patience with patients

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Like all foundation doctors I am currently trying to navigate the minefield of job decisions and applications. One thing I was always pretty certain that I wanted to avoid was a career in elderly medicine. Like many junior doctors, I find this group of patients rather more challenging than any other. The diagnostic difficulties are one thing, but add to this the fear of making medical conditions worse and, dare I say it, the difficulties with more agitated patients and sedation, and I found myself shrinking away by the minute.

And yet: part of my foundation year 2 was on a first-of-its-kind acute geriatric ward dealing specifically with older patients with dementia and delirium.

Given the criteria for patients admitted to this ward you would think that this would be an extremely stressful and noisy place to work. Actually this is not the case. The major surprise for me has been the rather relaxed atmosphere in which patients, who may be more disruptive on other wards, seem to be somehow calmed by the staff. Much of the difference is due to the nursing staff, who are all trained specifically in dealing with patients with confusion, and what a difference this makes.

Patients are no longer shouted at to “sit down” all the time, but are given the freedom to wander. I appreciate that occasionally we do accept a patient joining us on our ward

round, but it works. Crucially, this attitude towards patients is transferred to the whole team. It is not unusual to have a leisurely stroll with a lady who cannot find her chair, or with a man who has taken the scenic route on the way back from the toilet, but everyone just has so much more patience and flexibility.

Interestingly I have learnt relatively little about sedative drug use but, in the words of my consultant, “I have just become better at not using them.” Sometimes aggression and agitation can be calmed merely by spending an extra five minutes telling patients that they are in a safe place and that their family know where they are. It is time well spent.

Looking at this reasonably, it is not a far stretch to imagine feeling angry and overwhelmed if you are forgetful, and unwell in a strange place with no familiar faces for comfort. The team spend time reassuring patients, sometime repeatedly, and trying again later if now is not the right moment.

This year I am applying for core surgical training, but there are lessons and skills that I will take with me from every attachment. I have learnt that, regardless of future career plans, your attachments are what you make them, and there is as much to learn in terms of life skills, as there are medical skills.