

A grand stage of life

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I sit at my desk, bleary eyed, with the first morning coffee at my side. YouTube lifestyle gurus would be horrified that my morning routine consists not of yoga and meditation, but of drinking a dark Colombian brew while checking e-mails and laboratory results. My e-mail inbox announces a new *POEM*—not an emotional haiku, but *patient-oriented evidence that matters*. I read the title: “Sleep training positively impacts infant behaviour.”¹ My heart skips a beat. After a cursory read, I forward this to my son and daughter-in-law. It is not information they need to change behaviour. Rather, it affirms what they have already been doing. Forwarding my e-mail is in part motivated by a desire to validate, but also in part to be validated—to prove that I am indeed an evidence-based grandmother. This affords me agency and purchase in this role.

I have been a long-time granddoctor, but a relatively new grandmother. My practice is comprehensive and for some 20 years included low-risk primary care obstetrics. Many of the babies I delivered are now new mothers and fathers. They love looking at their own delivery room pictures on the walls of my examination rooms as we care for their babies.

The experience of being both a granddoctor and grandmother are not dissimilar. Both are longitudinal experiences with attendant nostalgia and opportunities for long-term reflection.

The forwarding of the *POEM* is partly to inform and partly to validate. This is not unlike what we do in shared decision making. We empower our patients by validating behaviour that is good for health while guiding them away from information that is not. We avoid being patronizing and allow them to make the decisions that will affect their treatment and screening.

In a world that values evidence over experience and data over reflection, there is a certain forgiveness in the

roles of grandmother and granddoctor. Although we can no longer rest on the laurels of experience as Marcus Welby of television fame did, we can sometimes throw in an occasional anecdote as long as it meets current evidential scrutiny.

A cursory review of the literature using the key words *evidence based grandparenting* led to an article in the *International Journal of Evidence-Based Healthcare*. The authors reviewed the literature to explore the “synergies that develop between grandparents and grandchildren.”² The authors reflected on the dual nature of grandparents finding purpose as they age and contributing to social well-being.

In 1905, Sir William Osler, then 55 years of age, once joked that men were comparatively useless after the age of 40. He recommended retirement at the age of 60.³ This seems ludicrously young by today's standards. There is no doubt that the exponential growth of information means that the work of keeping current requires mindful attention to study and continuing professional development. Granddoctors fear lack of relevance, just as grandparents do.

My *POEM* is forwarded and I sit back, coffee in hand, waiting for an approving response. No delusions of grandeur or grandiosity. Simply a grand stage of life. 🌿

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Competing interests

None declared

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