

When patients begin to trust us

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As I was flying up the coast of James Bay, headed toward the small isolated Cree community perched atop Ontario where I run a clinic once a month, I found myself anticipating my visit with a particular patient. I will call her Mary.

I have seen Mary on several occasions during my previous trips, but not enough to call myself her doctor. In fact, few patients feel attached to a particular physician in our area. Understaffing and a high turn-over rate among our typically young and mobile physicians mean that continuity of care suffers. But we do our best, trying to visit the same community during our allotted time "up the coast," whenever the emergency, inpatient, and obstetric services are sufficiently staffed for us to leave our base hospital in Moose Factory.

Mary suffered a tragic disfiguring injury several years ago. Shortly after that, her husband left her with several young children; he has not been seen or heard from since. With little support, Mary has had to raise these children and run a household on her own. The responsibility and seclusion have, over time, caught up with her and her family. Both she and her children have been suffering numerous aches and discomforts that no physician or test has been able to explain or relieve. When I suggested during a previous visit that, although both Mary and the children were clearly suffering, some of that suffering might not have a physical cause but rather be a reflection of their poignant emotional injuries, she looked at me disapprovingly and asked me to order more tests.

I took a deep breath as Mary led her children into the room, followed by the nurse carrying a thick pile of charts full of consultation reports, x-ray films, and laboratory test results which offered no help or

explanation. As she turned to leave the nurse told me, without a hint of sarcasm, that Mary had been looking forward to my visit. Really? I could not fathom how I had ever helped Mary or eased her or her children's suffering.

It turns out I had not. Mary was still complaining of a vague sensation in her chest, despite normal results of x-ray examinations, endoscopies, and cardiograms. One of her toddlers was still, according to Mary, having difficulty swallowing, although he looked happy, was growing well, had seen a pediatrician, and had even had a barium meal.

I proceeded to double-check my history and examination and, finding nothing, sat squarely in front of Mary. She scanned my face, apprehensive of some newly discovered bad news, and I scanned hers and wanted to break down. Mary's scars ran deep. How cruel this impartial world can be, and how impotent we are in the face of tragedy, I thought as I tried to decide what to say.

"Mary," I said, "you have a healthy, happy boy here. He is well nourished, and all the tests show that his swallowing is normal."

"Is there some other test?" she asked.

"Mary, you know sometimes it is quite normal for single parents to worry too much about their children. It's like they have to do twice as much worrying when they are alone."

"Yeah, it has been hard."

"But you seem to be doing well for your kids."

"Really? You think so?"

"Yes, I really do."

Mary showed a fleeting, almost imperceptible smile before moving on to that vague feeling in her chest. But that smile meant everything. To me, that smile meant I had finally visited enough times that she could begin to trust me.

It is her scarred smile that I think about now on the return journey, as I sit cramped in this small propeller plane where I write. Underneath, the vast muskeg battles with patches of scrawny pine and golden tamarack trees, their dwindling needles giving in to the colder and colder nights. Once in a while a little settlement interrupts this landscape, a geometric arrangement of fragile houses in an unforgiving environment.

How easy it would be to fly from one of these communities to another, never stopping long enough to see anyone more than once, or long enough to feel much sense of responsibility for the people or the place. Part of me longs for such a passing practice, but when I think about it, this is the part of me that seeks to gain from my profession, rather than the part of me that wants to contribute to it and to society. Family physicians are, by definition, resources to specific families and individuals over time.

This sense of affiliation can make our work more stressful and sometimes unpleasant—the misdiagnosis is clearly ours, the difficult patient encounter is not likely to be the last—but it more often makes it easier: a recurrent diagnosis is easier to pick up, we can better judge a family dynamic, and, perhaps above all, patients can begin to trust us. A relationship over time is a prerequisite to that trust and typically leads to fewer investigations, more satisfaction, and better outcomes.

Early on in a career it is normal to want to explore different locales and practice styles. Taking locum tenens positions is a natural avenue for that, and I have done my share of moving around. But I am starting to reflect on the value of continuity and stability and on our responsibility as primary caregivers in our society's health care system. It is a grave responsibility that governments and policy makers have not always made easier for us. That, in part, could explain the current unpopularity of family medicine as a career choice and the current shying away from purely general practice. But it remains essential nonetheless.

I could be wrong, but I believe Mary would not have ceased requesting more tests for her son, if

I had not seen her family on previous occasions. Perhaps part of her needs to express her worry and her suffering, and needs a familiar face to acknowledge it. The trust in me that she has developed will make it hard to leave this area, but I know that those tamarack trees, as beautiful as they are, will never fully feel like home. I can only hope that someone for whom they do, perhaps someone from Mary's village, perhaps even Mary's own son, will one day join our professional ranks and settle down in this region. As for me, perhaps Mary's trust—and her fleeting smile—will make me seek a home, once and for all.



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