The Whole Patient

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Editor’s note: The following is an editorial published in WMJ, Volume 37, p. 1014, November 1938.

Most of the patients we physicians see day in and day out present no very serious problems from either the viewpoint of diagnosis or sound treatment. They require the skilled attention of a physician but, with respect to ordinary illnesses, our training and experience enables us rather quickly to discover the causative factors and choose the most promising treatment.

Because this is true, how frequently are we apt to treat the “case”—particularly when we are confronted with a full waiting-room — without pausing to explain to the patient in at least a few words what it is that we have found, what it is that we will do, and advising, when the facts so indicate, that there is no cause for undue apprehension.

The earlier the patient comes to us with symptoms, the more evident it should be that it is in part at least his apprehension that brings him. This is as it should be. Let us not forget that if we treat the “case” and not the patient we will lack the human touch that has always marked the true physician.