When Iona Heath was chosen by Sir Richard Thompson, President of the Royal College of Physicians, to deliver the 2011 Harveian Oration, several senior Fellows of the College were outraged. A general practitioner giving the College’s most prestigious lecture of the year? Impossible! They wrote to the College to express concern about the President’s choice. Last week, their tribal parochialism was exposed as empty prejudice. Iona gave a splendid lecture. She was rewarded with warm and unusually sustained applause. She asked big questions about the profession, the body, and society. Her subject was the relationship between general practice and specialist medicine. She concluded that “medicine will never be a pure and simple place but its constant interplay of opposites makes space for courage, joy, creativity, and freedom and the possibility of making the world a better place. However, if beyond this, we cannot bring these opposites together into a more coherent, and in the case of society a fairer, whole, we will remain divided and we will fail.” Richard Thompson made a wise choice. The events that took place at the dinner afterwards were a different matter. Most of those present agreed that the after-dinner speaker made an excellent case for the abolition of hereditary peers in the House of Lords.

1700 general practitioners gathered last week in Liverpool. They gave a standing ovation to Clare Gerada, chair of the Royal College of General Practitioners. She spoke about the current marketisation of the NHS, the wider issue of commercialism in health care, and the urgent and perpetual need to put patients at the centre of our political debates. One danger of the Health and Social Care Bill is that a doctor’s first responsibility to the patient might well be compromised. If the Bill passes, general practitioners will have dual accountabilities—to patients and to the market. This situation would be intolerable.

Do you expect to see a policeman at a medical conference? Perhaps guarding the guests, but surely not as a speaker. Meet Detective Chief Superintendent John Carnochan. He works for Strathclyde Police, where his career has been dedicated to murder, crime, and fraud. But in 2005, he founded a Violence Reduction Unit that now works across the whole of Scotland. In an inspirational address, he used the life story of one young man, David, to show how the geography of a person’s life determines their health and even their very survival. Glasgow is divided into ganglands. Within those ganglands are rows of terraced houses that incubate drug trading, domestic violence, and organised crime. If one looks from above at David’s home and its physical relationship with the homes of others, one can immediately see, in a way not possible through a simple doctor-patient consultation, that David was trapped. Wherever he went, whatever he did, he was living within a culture that nurtured intergenerational abuse. There was no way out. Through a series of domestic upheavals and gradual slippage into a life on the other side of the law, his world dissolved. He didn’t have the life skills to escape. He couldn’t form the relationships to pull him out of oblivion. He didn’t live in a community that could create an alternative future. He didn’t live in a society that wanted to change. It says something that it took a policeman to show us the reality of health’s true context.

My highlights of general practice in the UK? Graham Watt’s GPs at the Deep End (search it out) and the increasing number of young doctors who seek international medical experience—an experience that changes them forever and is now beginning to change the lives of those in countries without the general practice that we take for granted.

The final word goes to Clare Gerada. She proved that Royal Colleges do, after all, serve a purpose. Asked what she wanted general practitioners to do in the face of a government assault on the fundamental values of medicine, she chose not to ask for disruptive protest or mass disengagement. Instead, she simply invited each doctor to concentrate on making every consultation count for the patient. Judge the reforms, she said, by the extent to which that consultation was harmed or threatened. This was a call for quiet accountability, a professional action that, if delivered and communicated, would become a powerful and unchallengeable force of resistance.

Richard Horton
richard.horton@lancet.com