

Family medicine, family practice and family doctor-an inseparable triad

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Personal - Care

Personal care is essential in family practice. Modern medicine is characterized by specialization and commercialization resulting in fragmentation, depersonalization and sophistication of technology and high cost. That diversity and limitation of care in medical specialties has altered and created a new demand for the rapid return of generalists, who will give personalized and cost effective care through holistic approach. In personal care, the family doctor looks not only the individual patient but to the family as well. He sees not only the disease but the whole person in his total environment, (biopsychosocial factor). Holistic approach and trusted "doctor - patient relationship" enables family doctor to have a wider insight into their problems.

Continuing Care

Continuing care follows after the first contact with Family Doctor. He plans for the management: immediate,

short-term and long-term care, using his own skill and experience and also mobilizing talents and facilities around him.

Patients with chronic conditions e.g. hypertension coronary heart diseases, diabetes, asthma, heart diseases are seen by Family Doctor for follow-up and continuing care. Continuing care expands from the childhood through adult to the elderly. In fact, family doctor provides continuing medical care for the family "from cradle to casket" service, which is unique to family practice. Continuing care may provide in two aspects (a) care of chronic diseases in an individual (b) life-span care, care of an individual from childhood to elderly person.

The ongoing relationship between a doctor and the patient is of paramount importance. Prolonged contact means that doctor uses repeated opportunities to gather information at a pace appropriate to each patient, and to build up a relationship of trust. Thus Family Doctor develops considerable knowledge and understanding of the patient, the family and the whole environment.

Comprehensive Care

Comprehensive care depicts the wide scope of care extending from assuring the likelihood of a healthy gestation to helping patients die with dignity.

Comprehensive Care

These include:

- Multidisciplinary care; - medical, surgical, O&G, psychiatric diseases management, etc.
- Multifaceted care; - care of physical, mental and social disorders,
- Multipurpose care; - preventive, promotive, curative and rehabilitative care.
- Coordinated care; - care provided by many different care providers. For example cancer patient may need coordination of care by surgeon, physician oncologist, physiotherapist and social worker. FD takes sense of responsibility if he finds something is beyond his ability to ensure that the patient receives adequate treatment from someone experienced in that particular area. At the same time he must maintain an overall ongoing supervisory role.

The field of family medicine covers a very wide area.

"General Practice/ Family Medicine is traditional method of bringing primary healthy care to the community. (John Murtagh)

Primary care and Family Medicine (FM) involves the ability to take responsible action to any health problem the patient presents.

Family Practitioner (FP) deals with problem complexes, much ill-defined illnesses rather than established diseases. As the point of first contact and community-based practice, patients may present to him "anything under the Sun".

Broadly speaking, there is nothing that is not a "GP's business". If the problem is out of his capacity he may make appropriate referral to other health care providers.

On this auspicious 'Family Doctors' Day, may I encourage all General Practitioners to keep up Continuing Medical Education (CME) and endeavour individual efforts to welfare of general public as well as reducing burden to tertiary health centres. ■