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CRITICAL THINKING

Matt Morgan: Do we still really need doctors?

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Patients can now travel through health systems without ever meeting or needing a doctor. If their minor foot infection gets worse despite topical treatment from a pharmacist, they may see a primary care specialist nurse. After being referred to the hospital's fast track assessment centre they're seen by a physician assistant, before having an operation carried out by a surgical nurse practitioner helped by an anaesthetic assistant. Their postoperative sepsis is spotted by the critical care outreach team, and an advanced critical care practitioner inserts a central line to treat their septic shock. They survive their critical illness and are followed up in clinic by a consultant psychologist, consultant physiotherapist, and critical care follow-up nurse. All of which begs the question—do we still really need doctors?

Acquiring specialist knowledge used to be expensive, guarded, and closely controlled. Budding doctors were invited into this hallowed fold if they were clever enough, rich enough, or connected enough. Today, a smartly edited 10 second clip on TikTok can teach millions of viewers the causes of clubbing. As medical knowledge has become openly accessible, doctors are defined more by their skills in specialist examinations or practical procedures. Today, however, the more experienced a doctor is, the less likely they are to compete with a first year phlebotomist in taking blood from that tricky patient, owing to a gradual deskilling in practical procedures. So, what's left? What are doctors for?

Overlapping needs

The “taskification” of medicine into discrete events, delivered through a multitude of roles, has not just flattened the hierarchy but jumped all over it. With this deconstruction comes protectionism regarding titles and role replacements, mostly motivated by patient safety concerns but with a little nepotism. Many safety concerns are valid, as medicine is much more than a series of discrete tasks.

Health can't be found only from a blood test, diagnosis, or procedure. Although the “art of medicine” is an overused phrase, medicine certainly isn't a factory line, simply producing new knees, improving levels of glycated haemoglobin, or cutting out cancers. There are times when a production line is an efficient and preferred model to learn from: you don't want a deep dive into your childhood medical history when you need a splinter or cataract removed. But single, simple pathology is rare. The entire population is ageing, with more comorbidity, and our health needs are increasingly overlapping. It's sometimes easier to say what a patient doesn't have than what they do have.

So, yes—we need roles with well grounded, deep knowledge of the boundaries of human health and science. Specialists with other titles could assume these roles, but their training, education, experience, and tools would need to achieve an equivalent breadth and depth to a medical degree with postgraduate time. And so, for now at least, people with this background are called doctors. Not only do we still need these roles but we need them more than ever. A return to the generalist has already started, recognising the modern maelstrom of health needs. The acute physician, the trauma surgeon, and the intensivist are all essentially generalists in niche circumstances.

The role of the doctor has changed, of course, and long may that continue. We're now conductors of an orchestra with an increasing array of old and new instruments, played by people from many different backgrounds. The conductor brings sounds to the front or fades them towards the back at the right times for the right music. They need to know the current arrangement in detail while also pulling experience from other orchestras, different music, and instruments they may have played in the past. They can't play every instrument in every orchestra, but they know how each one sounds and how loud it can go. They appreciate the skills, role, and dedication of each person making up that big orchestra sound.

Importantly, a conductor knows when to start and stop. And when the song ends, whether on a major or a minor note, everyone knows that the music came from the whole orchestra. But without the person holding the baton, everything would be out of time.

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