Halfway Treatment

“Allah loves that any of you when does a job, he should do it with perfection”
(Prophet Mohammed) (Peace Be Upon Him)

Thamer A Hamdan
MB, ChB, FRCS, Professor of Orthopaedic Surgery, Chancellor of Basrah University, Basrah, Iraq.

The journey of treatment which is, sometimes short or long or even very long, starts with a step in the consultation clinic, hoping to find a wide smile, soothing words, sympathy and empathy from the treating physician. This first meeting is the key for success or failure.

Sadly, this attitude is not always achievable. So many colleagues behave in an odd way, which is the classical and abbreviated meeting, totally away from mercy and kindness. Let us go back to Hippocratic saying “Listen to the patient, he is the one concerned; listen to the patient, he is telling you the diagnosis” so, if this meeting is not fruitful, it will become the beginning of failure and the start of halfway treatment.

A proper history and physical examination are mandatory. They should be neat and perfect. We have to keep in mind, as long as possible, that the diseased part is not separate. It is part of a human body, so, examination from hair to toe may be required. Our Prophet Mohammed said “Allah loves anyone of you if he does a job, he does it with perfection”. The question arises here is that how many of our colleagues perform his duty to satisfy Allah, the patient and the honesty of our dear career.

We have to believe that the journey of treatment is a chain circles connected to each other, and any tear or break in this chain may spoil the whole journey. Next to history and physical examination, is the investigation which should be
comprehensive and tailored according to the patient condition. Many investigations are missed leading to prolonged suffering and delay or even wrong diagnosis. Lack of awareness is usually the reason behind this incomplete or even deficient investigation. The next step and probably the most vital one, is the goal of our journey; that is the treatment which is rarely a single remedy. It may consist of several items. Giving some and forgetting others is not acceptable if not serious and dangerous. Treatment should be comprehensive and covers all aspects of patient’s suffering to overcome his pathological status. The question is how frequent our colleagues cover this point perfectly. I have seen so many sufferings because of incomplete or halfway treatment. Moreover, revision or colleague consultation may guide the physician and help in healing or curing the disease. The situation is worse in surgical practice, surely, it is not allowed to revise the site of surgery because of forgetting or missing part of the surgical steps required. Revision is allowed on rare occasions because of the development of some sort of complications.

Certainly, two brains are much better than one, so why not to ask for help before closing the abdomen if there is a minimum risk of imperfection. Unfortunately, so many sufferings were recorded because of halfway surgical practice. The patient pathology was tackled but in a deficient way. One good example is the incomplete removal of a tumor or removing the appendix without screening the nearby anatomy which may share in producing patient’s suffering, so, the answer from the patient end is that he improved but to some extent i.e. not achieving full extent of possible healing.

In orthopaedic practice, the story is broader and even worse than general surgery. Many examples are on the desk like doing incomplete or deficient internal or external fixation, forgetting to add bone graft for delayed union, partial correction of deformities, removing one level of the disc and leaving the other levels, or treating fractured shaft of the femur and missing hip dislocation; epsilateral or contralateral. A common missed problem is overlooking ligamentous injuries in association with fractures.

Everybody realize how sad and bad to perform halfway treatment. Personally, I feel that the real and easy solution for this serious problem is proper history, proper physical examination and comprehensive investigations to be followed by a well drawn map of treatment. If the fault is related to lack of experience, why not to ask for a free consultation which is now available and easy to achieve. I don’t think any one of us is a champion in his surgical practice reaching the level of perfection. In mind, perfection is a character of the Almighty Allah only. All of us are learners and we need the help of each other.

Finally, regards and respect must be paid for those who cut the story short by “one stop shop” with no compromise and no procrastination. All what is required is given in one step with no need for revision, and lucky who consults his colleagues whenever he is in trouble.