

Or is a children's physician just naturally nice? (1975)

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Another in our series of commentaries on notable papers from the DMCN archives. The paper is available at www.mackeith.co.uk

Mac Keith R. Or is a children's physician just naturally nice? *Dev Med Child Neurol* 1975; 17: 703.

Know thyself. Know your prejudices. You may react with irritation to the Irish parent who gives you the history he or she thinks you want to hear. Conversely, are you irked by the large matron held in by rubber roll-ons who produces a long list of 'neurotic' symptoms?

We may accept that it is a mild hypomania which makes us so wonderfully energetic in our work. We may accept that it is obsessional traits that lead us to keep such good records and to see both sides of every problem (and sometimes to be unable to decide). Is it some degree of insecurity that makes us sensitive to the anxieties of parents and of children? It is a good thing to be more upset by children's crying than are most of our colleagues.

To these neurotic traits which are useful to the paediatrician – and for that matter to the orthopaedic surgeon – I would add that a touch of masochism is valuable. It leads him to take pleasure in any opportunity to do something extra for parents and patients, to go himself to the clinic or ward and not leave it to whoever is on duty, and when parents feel uncertain about what was said at the last interview, he fits in an early extra appointment for them before the day's appointments start or during his midday time off. Masochistic perhaps for us, but good for the parents and for the children concerned. Embrace and make good use of your neurotic traits.

Commentary

I had always thought of neuroses as being at best a nuisance and at worst being crippling. That they could actually be useful is one of Ronnie Mac Keith's many insights for which I am grateful.

A degree of insecurity is a given constant for every doctor. The insecurity of appearing inadequate to families, or of not knowing what to do in an emergency prompts our continuing education. The insecurity of appearing wanting to our peers is one of the advantages to working in a team.

The insight to using our neuroses could, I would suggest, be coupled to analyzing our emotional responses as well. What is it about this mother that I find irritating? Is she vague because she has learning difficulties? Is she depressed or just very anxious? What is it about her account that makes me uncertain (a useful clue to the possibility of psychogenic nonepileptic seizures)? Why does this father make me angry? Is he a bully to his family as well?

Dealing with these emotional responses is another matter. The point here is not to disregard them but to use them as possible prompts to a better understanding of the situation.

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