

The Family Doctor in the Time of COVID-19

Daniel Loustalot*

FMH Specialist in Internal Medicine, Locarno, Switzerland

***Corresponding Author:** Daniel Loustalot, FMH Specialist in Internal Medicine, Locarno, Switzerland.

Received: February 11, 2021; **Published:** May 31, 2021

Reflections on the text Plato read 720, as a family doctor and psychosomat.

Again the Laws regarding the difference between free doctors and slave doctors (Laws, IV 720 ce): “the slave doctor, after having prescribed on the basis of experience what seems appropriate to him, runs away to another sick slave and thus relieves the master of the care of the sick; the free doctor, on the other hand, generally treats and investigates the diseases of the free sick and, studying them from the beginning according to their nature and talking to the sick person and his loved ones, he himself learns something about the sick and at the same time imparts notions to the sick as far as he it is possible and does not give any prescription before having convinced him: only then, reassuring the patient through persuasion and assiduous preparation, does he try to restore him to perfect health” [1].

Karl Jaspers in his book “the doctor in the age of technology” [2] takes this differentiation of slave doctor and free physician to compare today’s scientific - technical medicine to medicine for man. He talks about the “slave” doctor in the field of radiologist technique, trusted medical infectious virologist and so on, towards the free doctor who often translates, explains and informs the patient what is found by technical scientific medicine.

One cannot live - work without the other. Advances in medicine are due to advances on the scientific side. But it remains underneath the man to be treated. For 100 years (2019) psychosomatics in Switzerland has supported this side of the free doctor who listens, explains and together with the patient tries to find the path that is right for the individual patient.

This work in the context of a pandemic that affects people over 65 at the forefront is primordial. People who are already often alone, with pathologies and who in the field of isolation remain marginalized with few contacts both at home and in the home for the elderly. In this context, the family doctor plays the part of the free doctor; listens to, talks and explains the situation to the patients. To complete the great work done by “slave” doctors, this means scientific technical medicine. One cannot live without the other for a good performance for those who are sick.

The family doctor accompanies patients in an individual way, to counter the current situation of Pandemic where laws, orders, directives and fines dictate daily life and lead us into a situation as described by Michel Foucault [3] in the book “Supervise and punish. Birth of the prison”. The control of the exit time, of the space where I can move who I can meet, limits individual freedom in a fundamental way [4]. Systems of this kind have never been visited in a democracy, but only in dictatorships. In order to live with these limitations, the group of patients I have been accompanying for many years needs the presence of their family doctor, both at home and in homes for the elderly.

This direct patient-doctor contact allows the patient to overcome this emotionally difficult situation. Pierre de Villiers, who was in the French army for over 40 years to become “Général d’Armée”, says in his book “Qu’est-ce qu’un chef?” [5] “J’ai pris le temps de rencontrer, les yeux dans les yeux, qui fait tant défaut aujourd’hui”.

For him, general of the French army, the only means to overcome difficult times is direct contact looking into each other's eyes.

To accompany patients, the element of direct contact, looking into each other's eyes, is the key to therapy.

And finally: remember, the PC is a means for documentation but not for direct communication between people.

Treating patients and teamwork, medical therapist nurses accompany the sick. Late twentieth century Florence Nightingale [6] developed team care and this is still valid today. As healers we need "leaders" who are present and live the way they do with their example on the spot. This is the task of a care team in the spirit of Plato's free doctor. This way of leading a team is also described by Pierre de Villiers [5] p52: "To be exemplary and therefore credible, it is already best to stay natural. The leader is not distinguished by the strength of his jaws or the distance he establishes between his teams and himself. It is his role to create this dynamic of action, to create the 'mood', to reveal his talents. He can only achieve this if he knows how to convince, only if he agrees to indulge, not in communication, but in truth. Be serious without taking yourself seriously. The bottom line is to have a style, and that style, "it's the man himself," Buffon said. Exemplarity thus precedes subsidiarity Great leaders are admired for what they are and what they do. They are admirable for what they delegate".

In the nursing home, the leaders set an example by being present and working together with the team for the betterment of the residents.

In the outpatient medicine the family doctor and the care team are an example for patients who can thus follow the path of healing.

Volume 10 Issue 6 June 2021

©All rights reserved by Daniel Loustalot.