

Jon Garvey chews the cud



Healing hands

It is a cliché that doctors have bad handwriting. It is also, as a generalisation, true. The public at large accepts axiomatically that this should be so, just as doctors usually wear half-rimmed spectacles or call their female patients "dear". But what few suggestions have been made to account for the phenomenon have been both simplistic and unfounded.

It has been proposed, usually by doctors, that the superhuman effort of taking copious lecture notes with breakneck speed at medical school takes its toll on hands previously sensitive and aesthetic. This is demonstrably nonsense, as a little honest recollection will show that few medical students take notes in lectures. Few even *go* to lectures. Others have suggested that illegibility is a deliberate attempt on the part of the profession to hide medical facts from the patient.

This, too, is clearly false, as the doctor usually cannot read his own writing, which is far more inconvenient to him than it is to the patient. It has even been said that the doctor's writing is unreadable because it is in Latin, or Greek. Indeed, many doctors themselves thought this, until they realised that despite the trend towards prescribing in the vernacular in recent years, patients were still complimenting them on their classical education.

None of these explanations is in fact true, because the reality of the matter is that medical practitioners are actually *selected* for their bad handwriting. And by this I mean no mere selection by some turgid medical school interview panel, but

by the very forces of evolution!

Let me document this with my own case history. When I was at school, I had the worst writing in the establishment, with the exception of Timmis, who may have been dyslexic, and one of the masters, who had had a stroke.

This was always a source of great embarrassment to me and probably explains why I beat my wife. Nevertheless, it was not a conscious factor in my decision to become a doctor, this being more the result of inability to think of anything more original, such as ice lolly design, or the breeding of stag beetles in captivity.

At university I noticed an interesting thing. For some obscure reason, the human physiology and anatomy lectures were attended not only by medics, but by proto-vets and would-be natural scientists. At these lectures, as I scribbled little trials of centipede notes between doodles of rebelling laboratory rats, I noticed with shame that some of my neighbours were constructing an ordered, headed, and visually pleasing resumé of the lecturer's subject matter. I soon found that these people were invariably the non-medics, the medics either engaging in scrawlings such as mine, or more often in the production of paper darts.

By the time I reached medical school, lo! I found that my fellows were clamouring to borrow my exemplary notes as they couldn't read their own. I was among my own kind!

The obvious cause for the association between doctors and ataxic writing is that the genetic codes for both are carried on linked genes, which eclipse the usual association of handwriting characteristics with personality traits. This was brought home to me when a graphologist friend, studying a specimen of my longhand, first examined it long and hard, then stared at me, then looked at the writing, then at me again and said, "That's not you."

So, once again, this column has cleared up one of the mysteries of the universe, and laid a foundation for the discovery of a whole host of

additional occupational linked genes, such as Scheurmann's disease in social workers, reversed circadian rhythms in musicians, and so on. Suggestions on a postcard, please, to Potiphar.

Things photographic

The photographer from *World Medicine* came over the other weekend and took some mugshots to replace the one they've been using for the last twelvemonth—which was taken by my wife and had been previously rejected as technically unacceptable by *Pulse*. Potiphar refused to participate in the proceedings after somebody made a critical remark about the rock group, Camel.

It is hard to convey to someone who has not been at the receiving end of a photographic session since Polyfoto days just how intimidating it is, even to the most thoroughgoing narcissist. One is self-consciously aware that, whatever one does, one is going to project an image. Should one don one's working attire of sports jacket and gum-boots? Should one display in a suit with a carnation as a mark of respect to the reading public? Or should one wear what one has already worn to church on a Sunday, ie, bomber jacket and jeans?

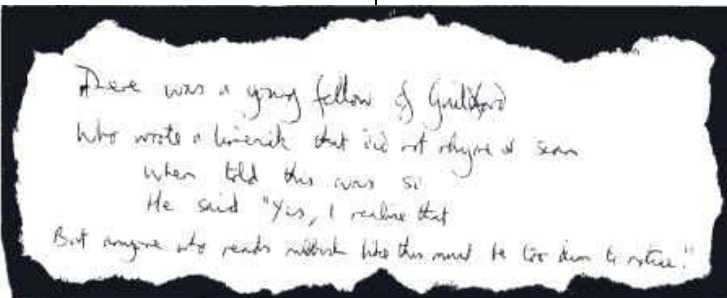
Confidence was not restored when I learned that the photographer believed quite sincerely that the act of photography steals the soul of the subject, and won't let his own family be photographed. I felt about as safe as a patient who has been told how safe his brain scan is, and sees the technician injecting him in plastic gloves and retiring behind a lead screen.

People who are photographed a lot, he said, soon acquire a brittle personality. As he ran rapidly through four rolls of film, a new dimension was added to my concept of the snap shot.

Armageddon

Every week, in one medical newspaper or another, I read some vociferous pronouncement by the *Medical Campaign Against Nuclear Weapons*. When they are not calling for the dismantling of our nuclear defence capability, they are trying to subvert conscientious GPs, and persuade them not to co-operate in the setting up of contingency civil defence plans for a possible nuclear strike.

By what right do these fanatical pro-life groups presume to impose their own moral standards on the rest of us...?



Illegible scrawl: Can you solve the riddle?