

EDITOR'S NOTE

Dr. Wolff is a board-certified family physician in private practice in Cornelius, North Carolina. He finished his family practice residency in 1997.

He has graciously consented to share stories from the trenches of primary care. While his practice diary is taken from actual patient encounters, the reader should be aware that some medication references may represent off-label uses.

We at the *Companion* are certain that these vignettes will inform, entertain, challenge, and stimulate our readers in their effort to address behavioral issues in the everyday practice of medicine.

Smoke 'Em if You Got 'Em

Christian G. Wolff, M.D.

Monday

JH is miffed with me this morning—sort of. Three weeks ago, I finally convinced this unemployed depressed 30-year-old man to start a medicine called fluoxetine. I explained all the risks and benefits, and he was clear that it was an antidepressant. I just didn't tell him the brand name because I knew he might decline therapy. He agreed with me today that he probably would have declined, yet he thanked me for the omission since now he is feeling much better.

This “subterfuge” is something I do not like, and I apply it sparingly. But, when I recognize that the brand name stigma is there and that he wouldn't be able to afford suitable medication otherwise, I will take that leap.

Tuesday

VT is a 27-year-old woman whom I have seen for 5 years and always suspected to have hypochondriasis. During a flexible sigmoidoscopy that I fully expected to reveal internal hemorrhoids, I was horrified to find a large fungating rectal mass. This once again underscores the adage that even suspected crazy people get real illness.

Wednesday

Today I'm seeing a delightful 4-year-old girl for her well exam and will inquire about her elder half-sister. CE is a 16-year-old teenager who, by my knowledge of the situation, is in a wonderful, well-adjusted, and loving family. However, CE has been acting out over the last year with suicidal gestures and sexual impropriety. She's seen psychiatrists and psychologists and numerous counselors, both alone and with her family, though she continues to act out. I can tell this is a strain on her mother and stepfather.

I wish I had the power to write a prescription to correct that situation.

Thursday

Remember in medical school, when during pathology class you convinced yourself that you had every ailment from kwashiorkor to kala-azar? (I always fell for the exotic ones.) Well, now that my wife and I are expecting our second child, for some reason I have pangs of paranoia about every perinatal complication that I can recall. Although I keep these thoughts to myself (except when I share them with the masses of strangers through the diary), they do allow me to better empathize with my patients. For example, last night a first-time mom called me at 2:00 AM with a flatulence inquiry. Well, maybe just a little empathy.

Friday

Smoking is such an awful habit. First, you get hooked on an expensive foul-smelling activity that can kill you. Then, when you try to quit, there is a paucity of success in credible medical assistance regimens. As a re-

sult, the charlatans of the smoking-cessation industry lurk behind every corner.

LT is a 40-year-old fellow (ironically, a production supervisor for a tobacco company) who asked me today about “laser smoking cessation therapy.” Apparently, he spent \$500 for 3 “laser” treatments in which he would sit in a device that suspiciously resembles a tanning bed.

He was then (to their credit) given pamphlets from the American Lung Association and told to follow the instructions therein.

Five hundred bucks a sucker, er, I mean client. Hmm, I wonder what their success rate is compared to the general population. The sad thing is, it’s probably equivalent. ♦