VIEWS AND REVIEWS

ACUTE PERSPECTIVE

David Oliver: The pundits who do doctors down

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Rigorous, lengthy medical training is a good thing. High levels of public trust in doctors don't result from qualifications obtained like lottery tickets.¹ Yet a select right wing commentariat with no credible background in healthcare argues that medics are overqualified, overpaid, or operating a cartel to increase income and status.

The *Times* newspaper quoted UK taxpayer costs of £560 000 (£735 000; \$820 000) to train a consultant, conveniently forgetting the decade spent in paid employment, delivering clinical services night and day while studying for exams in "spare time."

Henry Hill, of the Conservative Home blog, proposed an "army of volunteer NHS reservists," ready to step in at a moment's notice.² Are emergency physicians or trauma surgeons sitting at home, waiting for the call? We have big workforce gaps, remember?

Sam Bowman, of the libertarian Adam Smith Institute, enjoyed trolling doctors, whom he described on Twitter as "low-tech prescription writing machines" who should "get a real job."^{3 4} Anaesthetists who run intensive care and enable modern surgery are not proper doctors but are more like coffee "baristas," he opined.⁵ He's also argued that doctors are overpaid and that entry requirements to medicine should be lowered to flood the labour market.⁶

The pro-market think tank Reform said that about half of GP appointments could be taken by other members of staff or dealt with online—hardly original thinking.⁷ GPs' own organisations have willingly reached this conclusion for themselves already.⁸

The *Daily Telegraph* executive political editor, James Kirkup, wrote that wearable health monitors, smartphone apps, and surgical robots could make doctors as redundant as British coal miners in a generation, asserting that 85% of doctors' jobs could be done just as well by less trained and far cheaper staff.^{9 10}

This magical tank-thinking is driven by an ideological animus against public sector professions. It also justifies the think tanks' existence.

But robust empirical evidence that any of this will replace all need for skilled medical care is lacking. UK medical leaders have acknowledged repeatedly that we need to focus more on

prevention and self care; they don't need persuading. Short staffed doctors are grateful for any help they can get. A recent Nuffield Trust report,¹¹ proposing greater use of advanced practitioner nurses and allied professionals, was welcomed in principle but was misrepresented by the *Times*.¹² The NHS already relies extensively on them. But they too face major workforce crises that pundits have ignored in their enthusiasm.¹³

Health services that make more use of markets and competition have higher costs and more doctors. Given a choice, patients tend to pick and choose doctors more, with a penchant for specialists. Back to the drawing board, boys; and Sam, if you ever need surgery, I'd suggest an anaesthetic, not a cappuccino.

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