VIEWS AND REVIEWS

CUT TO THE CHASE

Gabriel Weston: Sing a song of lung health

Gabriel Weston *ENT surgeon*

Surrey

Just before Christmas I visited an inspiring class at the Royal Brompton Hospital. Set up 10 years ago, Singing for Breathing offers an alternative to usual lung rehabilitation for people with chronic lung disease. Although many conditions are represented, most participants have chronic obstructive pulmonary disease—no great surprise when it's currently ranked by the World Health Organization as the fourth biggest cause of death in the developed world, affecting 3.7 million people in the UK.

In one sense, the suffering associated with respiratory disease is special. Breathlessness is something uniquely terrifying, often likened by patients to suffocation or drowning, as the psychologist Christopher Eccleston writes in *Embodied*, his wonderful book on physical sensation. These patients are also more likely than most others to experience anxiety, depression, and feelings of social isolation.

In another regard, one chronic illness looks much like another. Whatever specialty we've chosen, our patients bear a similar burden: the grind of managing difficult symptoms, the conundrum of negotiating family and working life around hospital appointments, and the deep sense of disappointment from inhabiting a body that doesn't function as it should.

After a series of breathing exercises, we're filling the room with song

The teacher tunes his guitar as his singers arrive. Some come straight from the ward in wheelchairs, with drip stands attached. Others bring fresh air in on their coats. I see panting, wheezing, coughing, and greetings of old friends. But soon, after a series

of breathing exercises, we're filling the room with song: Elton John, Michael Jackson, Perry Como.

A 2016 systematic literature review found that such sessions compare favourably with conventional physiotherapy across a range of outcomes, and more than 70 hospitals nationwide now have them. So, I'm not surprised by patients who stop on their way out to rave about the positive effect this class has had on their life. What does astonish me is how much better I feel at the end of the session myself despite having clear, non-stertorous lungs and a complacent sense of my own physical normality.

Illness doesn't just mirror illness: disease also works as a kind of metaphor for the simple mess of being alive. And the heroic ways in which people manage can reveal plenty to those of us still inhabiting the lofty realms of presumed health.

As I begin 2019 I wonder how I might introduce to my own clinical space some of the human warmth I felt among those brave, breathless singers. Bring biscuits? Offer a choice of music from my phone? Or perhaps just remove my head from my own backside long enough to engage meaningfully for a while with each of my patients, before reaching for the reassuring anonymity of my knife.

Competing interests: I have read and understood BMJ policy on declaration of interests and declare that I have no competing interests.

Provenance and peer review: Commissioned; not externally peer reviewed.

Published by the BMJ Publishing Group Limited. For permission to use (where not already granted under a licence) please go to <http://group.bmj.com/group/rights-licensing/permissions>