A whole person approach: the integrated respiratory physician

Consultant integrated respiratory physician Irem Patel tells Adrian O’Dowd why she loves to get outside hospital to see patients and work with local GPs

Adrian O’Dowd

Irem Patel was originally inspired to pursue a career in respiratory medicine by a woman she describes as her role model.

“During my first house job I worked in a respiratory team that was led by a rather charismatic, inspiring, and robust female consultant. Her clinical approach to patient care, teaching style, and leadership made a big impression on me,” she remembers.

After this, it was patients with respiratory conditions who drew her to the specialty.

“Inevitably, as a junior doctor I saw lots of patients presenting with chronic obstructive pulmonary disease exacerbations,” she says. “I found myself struck by their stoicism, humour, and strength, despite living in circumstances increasingly constrained by breathlessness and debility.”

But she also remembers her frustration that care was reactive and generic, and did not serve them well. She began to see a better option in an integrated care approach.

“I became increasingly interested in how a life course, person-centred approach—bringing expertise and care closer to the patient—might deliver better outcomes and also be a more rewarding way to work,” she says.

Today she is a consultant integrated respiratory physician at King’s College Hospital NHS Foundation Trust in south east London, serving a population of 700,000. Patel and local GP respiratory leads, within a multidisciplinary team, work across primary, secondary, and community care to support patients with complex breathlessness both in hospital and at home.

The team takes a “whole person approach” to managing patients.

“Integration is about partnership, bypassing traditional boundaries, and considering the whole person, beyond what is the matter with them,” she says. “The focus is on what the patient needs—who they are, as opposed to what’s wrong with them; where they are; and how we can best meet their needs.”

She was appointed to her post—one of the first integrated respiratory posts in the UK—in 2009. She has since worked to develop coordinated multidisciplinary services for patients with long term respiratory conditions throughout London.

“The role is about working with and learning from lots of other people, not least people with lung disease. In any team, but perhaps especially in an integrated one, everyone’s specific skills, sphere of reference, expertise, beliefs, and values have a part to play in patient care.”

Planning care with a range of different colleagues gives permission to step outside the department, hospital, or surgery doors, and outside a traditional role to look at things differently, she says. “I love getting to work with lots of different people who I may not have met if I had kept to a traditional secondary care role.

“To work with a GP colleague in a clinical setting, to discuss a patient that we both know but bring our different perspectives to, and then, together, to think about how to improve their clinical care and outcomes, is brilliant fun.”

Originally from Turkey, Patel’s family moved to the UK when she was a child. “I had to get used to a whole new society, culture, place, school system, and language,” she says. “I am very grateful for all the opportunities a life in the UK has given me.”

Patel’s career has led her to take up a range of other roles including joint director of clinical strategy at King’s Health Partners, honorary senior lecturer at King’s College London, and joint clinical director for the NHS England London region respiratory clinical network.

But she doesn’t forget the next generation of doctors—inspiring and supporting them is important, she says. “Of course, we all aim to lead by example and to demonstrate the values, behaviours, and beliefs that we carry, so that hopefully we can be a positive influence on those around us.

“Opening doors for others as we go along is one of the most important things we can do as senior clinicians. For me, this comes from a sense of thankfulness for the doors that were opened for me.”

Nominated by Laura-Jane Smith

“I became aware of Irem’s work when I was a respiratory registrar. I had strong interests in both chronic obstructive pulmonary disease and health inequalities and I was inspired by how Irem had worked in an entirely new role as one of the first integrated respiratory consultants in the UK, and how she had led and nurtured an integrated respiratory service.

“What resonated so strongly was her commitment to improving the health outcomes and experience of people under her care, by changing the way she worked rather than expecting the patients to fit in with how services were already organised.

“I was fortunate that a job came up at King’s when I came to the end of my training and now work alongside Irem as a colleague. I continue to learn from her experience and her approach, and on a personal level, she is thoughtful, kind, and an incredible support.”
Laura-Jane Smith is consultant respiratory physician at King’s College Hospital NHS Foundation Trust, London.