

assumptions I make. And for me, this way of dealing with it is extremely beneficial.”

He has had to learn to become particularly self aware in his work with grief and bereavement: “I think there are times when I am feeling so miserable in myself that it is extremely difficult to help other people who are facing those problems. Then I have to take a step back, I have to say, ‘This is too much for me to do right now.’ Doing grief work, you have to give of yourself, and there are times when I can’t do that.”

He feels his personal experience of mental illness has helped his understanding as a psychiatrist.

“I think it has helped knowing what it feels like from inside. I don’t foist it on them, but if I feel it is constructive to say to them, ‘I think I have had an experience like yours—for me it felt like this, I wonder if it is the same for you?’

“That gives them the room to say, ‘Yes, you know exactly what I am talking about.’ In that case we are closer together, or they can say, ‘It was different for me,’ and then straight away I know more about them.

“Because I have been depressed myself, I have to be aware that the way I feel may be very different from the way they feel, but I do think it has given me a kind of empathy for what it might be like for them.”

Helen Crane, freelance journalist
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Diabetes

Derbyshire general practitioner Stuart Bootle has had diabetes for 20 years. He speaks to Paul Smith, who also has type 1 diabetes

Stuart Bootle’s diabetes was effectively diagnosed by a veterinary nurse. He was a medical student in 1983. He laughs as he tells the story, because the vet nurse in question was his girlfriend, Nancy, who used a urine strip intended for her animal patients. He was suitably grateful, and she eventually became his wife.

“I’d been feeling terrible and was drinking loads. I was living with four other medical students at the time, and I suppose I felt that it was just part of the student lifestyle. None of us had been taught much about diabetes, so when Nancy did the test and I had glycosuria, I think that was the first indication it might be diabetes.”

As luck would have it, he was sent, as part of his training, to Manchester Royal Infirmary to work in the endocrinology department: “There was a discussion about diabetes, and at the end I put up my hand and told them I thought I may have it. My blood sugars were actually dangerously high—I had a measurement of about 50 mmol/l.”

Now 42 years old, Stuart Bootle’s experiences as an NHS patient have influenced

his NHS career. Today he runs a primary care diabetes service in Whaley Bridge, Derbyshire, he’s had input into the national service framework for diabetes, and he helps other professionals improve diabetes treatment.

Like me, he is one of the few people with diabetes to have read the diabetes national service framework from cover to cover. It is easy to describe him as an expert patient—that new breed of “NHS consumer” now central to the Department of Health’s conception of how those with chronic disease should take on greater responsibility for their own care. However, the fact he is a doctor specialising in diabetes with first hand experience of patients with poor self care—and the long term complications ranging from kidney disease to increased risk of heart disease—does not mean he’s a perfect patient.

As a diabetic for the past 12 years, I could disapprove. I’ve drunk myself stupid at university, I’ve smoked, and I’ve vegetated. I’ve binged, and I’ve forgotten to take my insulin and still gone out wining and dining because I didn’t want to turn down a night out.

However much I understand the risks—and even fear them—and however much it frustrates

healthcare professionals, I, like many people with diabetes, rarely put my condition first in my lifestyle.

Bootle suffered his first hypoglycaemic episode only days after his diabetes was diagnosed—seduced by the pub down the road from the hospital and frustrated by the boredom of being a patient. All he remembers after drinking two beers is waking up back on the ward he had left a few hours earlier and “sweating like a pig.”

“I don’t always look after myself all the time. Even GPs are human. I do drink, but I don’t smoke. It comes down to personal risk management, and, like everyone, I want a balance in my life. I know that sounds very rational. The truth is I am scared about the long term, I’m scared of going blind or having my legs chopped off. But you have to focus and manage those risks like any other.”

His practice is a success—with patients achieving reductions in their blood sugar, blood pressure, and serum cholesterol results, and low DNA (“Did not attend”) rates. To those who attribute his success to having diabetes, he says: “The idea that you only understand a condition by having it yourself is a myth. You don’t need to suffer a heart attack to treat a heart attack victim. It’s the same with diabetes. The secret is to listen.”

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QUICK FACTS

For more information on: Depression United Kingdom

■ Royal College of Psychiatrists (for information booklets, etc).
Tel: 020 7235 2351.
Website: www.rcpsych.ac.uk
■ MIND. Tel: 020 8519 2122. Mindinfoline: 08457 660 163. Website: www.mind.org.uk
■ Mental Health

Foundation. Website: www.mentalhealth.org.uk
■ Depression Alliance. Tel: 020 7633 0557. Website: www.depressionalliance.org
United States
■ American Psychiatric Association. Website: www.psych.org
■ National Mental Health Association. Website: www.nmha.org
■ National Foundation for

Depressive Illness. Website: www.depression.org
For more information on: Diabetes
■ American Diabetes Association. Website: www.diabetes.org
■ Diabetes UK. Website: www.diabetes.org.uk
■ Association of British Clinical Diabetologists. Website: www.diabetologists-abcd.org.uk

For more information on: Multiple sclerosis
■ The Multiple Sclerosis Society of Great Britain. Tel: 020 8438 0700. Helpline: 0808 800 8000. Email: info@mssociety.org.uk. Website: www.mssociety.org.uk
■ National Multiple Sclerosis Society, 733 Third Avenue, New York, NY 10017. Website:

www.nmss.org
■ Multiple Sclerosis International Federation. Website: msif.org
■ American Academy of Neurology. Website: www.aan.com
■ International Multiple Sclerosis Support Foundation. Website: www.nsnews.org