

THE SPECIALIST CONSUMER

Not so long ago our community was comfortable using the words *doctor*, *nurse* and *patient*. However, as medicine has adopted the culture of the commercial world, with its emphasis on *clinical products* and *customer focus*, some consider that these traditional titles have reached their use-by date.

Now doctors and nurses have become *healthcare providers*, and patients are known as *clients*, *customers*, or *consumers*. It is argued that the term “consumers” more appropriately conveys the choice that people may wish to exercise in decisions about their health, and the expression “healthcare providers” reflects the current emphasis on teamwork.

But there is a new twist to the tale.

At a recent healthcare policy conference the “consumer” representative was introduced as a “cancer consumer”. My editorial sensitivity was somewhat shaken. The Oxford Concise Dictionary defines a consumer as: “1. a person who consumes esp. one who uses a product. 2. a purchaser of goods or services.”

Was the introduction an unintended slip of the tongue? Did the chairman mean “cancer-care consumer”? Apparently not. The person identified himself as just that — a “cancer consumer”, a survivor of cancer — and went on to describe what “cancer consumers” want.

Are health “consumers” specialising? We already have “research consumers” and “mental health consumers”. Will we now see “cardiac consumers”, “diabetic consumers”, “colorectal consumers”, and so on?

An overwhelming criticism of modern medicine is the dominance of specialism, which has led to fault lines in medicine with the emergence of increasingly isolated specialties, accompanied by their somewhat insular and introspective lobby groups.

Will the same fate befall the consumer movement?

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