

Issue: [Volume 5, Issue 1](#)

Back Bencher: A view of life and continuing medical education from the back benches

Dr B C Rao (Mentor, AFPI Karnataka)

I am comfortable sitting at the back in any function, be it a continuing education meeting, a wedding reception or a civic get together. This habit I acquired some 50 years back in medical school. Then it gave me an opportunity to unobtrusively leave the hall through the large french windows placed strategically on the sides of the lecture hall. Those days the lecturers if they noticed one's absence, took no offence.

This habit has stood me in good stead and gives me ample opportunity to leave midway without offending the speaker or the organizers. On rare occasions, when I had to don the mantle of a speaker I keep a subtle watch on the back rows to see if any one leaving midway, a sure sign of boredom/inattention. I am rather fortunate that it has not happened often.

In those bygone days, the continuing education programs were simple affairs with a lunch or high tea thrown in at the beginning or at the end. The speakers mostly depended

on memory and experience and spoke extempore. Naturally some of them bored us to death. Then too being a back-chair occupier came in handy to take unobtrusive leave.

Has the advent of advanced audiovisual aids motivated me to occupy front seats? Sadly no. I find it has made matters worse. The modern-day speakers, with rare exceptions, have taken to reading these projected slides and not really addressing the audience. Droning voice combined with dimmed lighting is conducive to sleep and it's with difficulty that I keep my head up and eyes open. This goes unnoticed if you are a back seater. When I compare the speakers of yesteryears to the present ones the ones of the past get a higher score. May be, being old myself, I may be biased. I remember vividly my Neurology teacher professor late M.K Mani miming grand mal and petite mal (now the modern neurologists have named these differently) while speaking on epilepsy. Similarly, I remember another M.K Mani (

great teacher, alive and kicking) speaking on hypertension, though with the help of slides but hardly looking at them.

Lately I am facing a piquant situation. Thanks to my seniority and mop of grey hair, I am easily spotted and given our penchant for recognizing (respecting?) old age, I am forcefully escorted to the front row of chairs to my discomfort. Here again there's is some hierarchical distinction. The front most row is generally is a row of cushioned sofas or well-padded chairs meant for VIPs and thankfully the organizers have not recognized me as one and they usually make me sit behind these.

The front row occupants generally come late and the importance is based on the position they hold rather than to any achievement academic or otherwise. Needless to say, by arriving late, they also hold up the proceedings. In one such meeting a serving police official of ill repute was the chief guest in a professional function. I felt happy that I was not in that front row sitting with this worthy.

It's a different matter in social functions like weddings and receptions. Being the family doctor for generations of families, I often get invited to many of these which even includes ceremonies associated with death. Often, I have the dubious distinction of having presided over these deaths. Readers should not get the impression that I am another Dr Herold Shipman [who killed many an elderly]. In my case these patients who died under my care at home were terminally ill and I saw to it that unnecessary

hospitalization and the resulting expense were avoided. Weddings however are joyous occasions. Normally I try and avoid these ostentatious and wasteful ceremonies. But sometimes I have to attend as the families concerned are too close for me to not to.

Recently I went to a wedding. The girl, a third-generation patient, I have known since her birth. She is now placed in the US and the young man; her groom is a German. The girl's father and mother and the grandparents from both sides also are/were my patients.

Both the grandfathers are dead (under my care at home), but the ailing grandmothers pushing 80 are very much alive. So this intimate relationship made it impossible to avoid this wedding.

The simple wedding ceremony was over and the time arrived to bless the couple. Normally the elders of both sides take the first honor followed by other relatives and friends. In this wedding, this tradition was broken and I was ceremoniously escorted to the platform where the bride and groom sat and was requested to initiate the process. It must be a spectacle to the well-dressed gathering to see this chappal clad, shirt and trouser wearing, nondescript old person belonging to another caste and community, being escorted to initiate the holy process.

This kind of affection, respect and love makes us family physicians feel that we made the right choice in choosing this branch of medicine.

