

Bitter medicine

Pity the healthcare professionals who dare to speak out about NHS problems

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Almost two years ago, a cancer surgeon named Joseph Meirion Thomas decided that he could no longer keep quiet about what he regarded as a major abuse of the NHS. The Francis inquiry into the scandal at Stafford Hospital had just published its report, reminding doctors of their 'duty of candour'. Thomas interpreted that to mean that health professionals 'should feel supported and protected should they ever need to speak out.' In that spirit, he wrote in *The Spectator* about 'health tourism' – foreign nationals using NHS services to which they are not entitled, placing an already overburdened system under yet more strain.

His article caught the attention of Jeremy Hunt, the Health Secretary, who ordered a full investigation. Encouraged, Thomas went on to write more articles about the NHS's problems, much to the chagrin of the health establishment. The last of these sought to challenge the idea that GPs are always and everywhere a force for good. In fact they're overrated, he said. Rather than being 'supported and protected', Thomas then found himself suspended from his job and ordered not to air his views in public again. Even now, he is unable to tell his story.

Like most whistleblowers, Meirion Thomas is a prickly character, as Jeremy Hunt soon discovered. The Health Secretary contacted him in person after the 'health tourism' article to applaud his stand. Hunt's reward was a follow-up article accusing the government of failing 'to grasp the nettle' of health tourism, and then another arguing that its whole approach to NHS reform was wrongheaded. The articles were picked up by the daily newspapers, and caused quite a stir.

It's easy to see why. Many of the NHS's 1.7 million staff can see what's wrong with the service, but are afraid to speak out. As the Francis inquiry concluded, this lack of candour has become one of the most serious problems facing British healthcare. Even discussing NHS failures in private can be risky. Doing it in the press is tantamount to career suicide.

Just ask Shiban Ahmed, a paediatric sur-



geon who attempted to blow the whistle on the 'barbaric and amateurish' circumcisions of boys aged six to ten at the hands of poorly trained GPs. He flagged the issue to the patient safety regulator, and ended up facing disciplinary action. Or there's Peter O'Keefe, a heart surgeon who was suspended (on 'bullying' charges) after he raised concerns about the treatment of a patient who had serious brain damage. Or Dr Raj Mattu, a cardiologist who lost his job at a Coventry hospital after warning on national radio that patients were dying because a cardiac unit was overcrowded.

But Thomas refused to be cowed. A year

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ago, he wrote an article for the *Daily Mail* floating the politically incorrect idea that the growing dominance of women doctors in British healthcare is a potential problem. 'I am a feminist,' he said, but he was still alarmed that women make up 61 per cent of doctors under the age of 30. Female doctors, he said, 'end up working part-time, usually in general practice, and then retire early... as a result, it is necessary to train two female doctors so they can cover the same amount of work as one full-time colleague.'

This annoyed the medical profession so much that the Royal College of Surgeons was lobbied to denounce him. Its president was badgered into saying that he found the article 'unhelpful'.

In November, in the *Daily Mail* again,

Thomas wrote that GPs were 'an anachronism no longer fit for purpose'. Family doctors are increasingly unavailable to their patients, he said, and 'have also shown they are not trained or equipped for highly specialised medical work. So patients have no option but to attend A&E or ring the emergency services.'

For some figures in the upper echelons of the NHS, this was just too much. Maureen Baker, chair of the Royal College of General Practitioners, sent an email to colleagues saying: 'I am sure you will be as outraged as I was this week when you read Professor J. Meirion Thomas' scathing article... I don't know what Meirion Thomas's problem is. Perhaps he just doesn't understand the complex and excellent work involved in general practice? Perhaps he is just living in another – outdated – time, that is best left in the past.' In an official response, entitled 'Meirion Thomas will have made GPs' blood boil', she called the surgeon's views 'misplaced, elitist, and archaic'.

Doctors took to Twitter and Facebook to share their disgust. Lucy Gaden, a doctor in Nottingham, put up an online petition on the website change.org entitled: 'Stop Prof Meirion Thomas disrespecting GPs, female and overseas doctors in the media'. Dr Gaden suggested that he had breached the General Medical Council's rules on doctorly behaviour:

The GMC Duties of a Doctor document states: 35. You must work collaboratively with colleagues, respecting their skills and contributions. 36. You must treat colleagues fairly and with respect. 37. You must be aware of how your behaviour may influence others within and outside the team. His failure on all three of these components needs highlighting to the GMC.

The petition garnered more than 1,500 'supporters'. One, going by the name 'Richard Clubb', wrote underneath: 'I'm signing because you are a disgrace to your profession and to your Welsh Christian name. I assume you are not well.'

Dr Gaden insists she doesn't want Thomas to be struck off. 'I just want him to be given a jolly good ticking off,' she told me. 'I do believe that he has a right to free

speech but I don't believe as a doctor he has the right to publish such inflammatory articles, and he has clearly breached his duties as a doctor.'

The GMC, to its great credit, endorsed Meirion Thomas's right to speak freely and said it would not pursue the matter. But his enemies would not be stopped there.

A new email went round among doctors under the subject heading 'The vile Mr Meirion Thomas', calling him an 'evil man'. Professor Azeem Majeed, who runs the Department of Primary Care and Public Health at Imperial College London wrote a bossy email to the chiefs of the Royal Marsden, where Thomas works, apparently suggesting that the hospital could suffer financially as a result of his outbursts. It is worth quoting at length:

I would be very grateful if you could answer some questions for me and my colleagues. Firstly, does the article represent the views of your senior medical staff? If not, do you plan to issue a statement disassociating yourself from the article? Secondly, can you summarise your policies for ensuring good working relationships with NHS staff working in primary care? Thirdly, can you explain to me why GPs should continue to refer patients to the Royal Marsden Hospital rather than some of the other large NHS Trusts in London that offer excellent cancer services – such as Imperial, UCLH, GSIT and King's – where we have very good working relationships with their specialist medical staff?

The Royal Marsden was put in a difficult position, faced with a possible loss of patient referrals as a result of Thomas's actions. Its directors decided to put Thomas on gardening leave, then reinstated him on the condition that he never published an article again – at least not without submitting the text to the hospital's management for approval. A gagging order, in other words, which Thomas had to sign to keep his job.

At the same time, Imperial College wrote to Thomas informing him that he did not have the right to call himself professor – as he had done in his articles and on the Royal Marsden website – since his honorary professorship from Imperial had expired in 2012. Imperial told me that 'as a matter of routine the College writes to correct out-of-date information in the public domain.' But there can be no doubt that their letter was prompted by Thomas's attack on GPs.

Thomas declined to comment on this article, other than to say that he had not been aware his professorship had expired until he read the letter from Imperial. Professor Martin Gore, the Marsden's medical director, also refused to say anything. Professor Majeed confirmed that he had emailed the Marsden, but said that he was not involved in the 'preparation or sending' of the letter concerning Thomas's professorship.

The Royal Marsden has sought to draw

Solitude

Together, they wrote a book.
Its title was *Solitude*, or
Every Man his own Hermit.

They wrote alternate chapters
in a small room with one chair and a desk
hardly bigger than A4.

Bip wrote on Saturdays, Mondays
and Wednesdays, Bop on the other days,
On Sundays, neither wrote.

On Sundays, they went together
to search for the stuff of fiction.
They travelled, gambled, dug gardens,

dated deep women, whose talk
they would agonise over on weekdays
at that desk, working out meanings.

—John Gahorry

a line under the matter. It published a statement on its website saying it does not 'share, condone or support' Thomas's views: 'It is important to state that all individuals are entitled to express a view. They are not however entitled to speak on behalf of an organisation without that organisation's consent. Professor Thomas did not seek or receive this organisation's consent to either article.'

But Thomas did not claim to speak for the Royal Marsden. Indeed, when he wrote for

The Spectator, he insisted on being described simply as an NHS surgeon. His critics knew, however, that the Marsden, as his employer, had the power to shut him up.

What's most troubling is that, for all the fuss, almost no one has attempted to tackle Thomas's arguments. The offended doctors prefer to say how hurt they are, and isn't that outrageous. But wounded feelings don't matter, really, and free speech does. Moreover, free speech inside Britain's health service – on which so many lives depend – is especially important.

Following the Stafford Hospital scandal – when patients were regularly left lying in their own faeces because the hospital was so badly run – Sir David Nicholson, the then head of the NHS, pledged to intervene whenever he 'caught a whiff' that staff were being bullied into staying quiet. The British Medical Association spoke of the need for a 'new NHS culture... where there is an ethos that raising concerns is not only acceptable but a positive thing to do.'

While it is true that Thomas's articles did not expose some Stafford Hospital-style horror, he was raising genuine concerns and trying to say how the NHS might work better. For this, he has been denounced, abused and hushed.

It's hard to change the culture of a cherished but flawed institution such as the NHS, especially when the treatment of people such as Thomas sends a strong message. Yes, the government says you should speak out if you see something wrong. But look at what happens to those who do.



'OK buddy, I'm arresting you
for impersonating a police officer.'