

Message from Editor in Chief of Thai Journal of Gastroenterology 2007-2008



This is the second issue of Thai Journal of Gastroenterology for this year. We have a very welcome positive feedback from our readers. In this issue, we have many beautiful pictures from endoscopic corner and pathology corner. Multiple faces of liver hemangiomas is the topic of images in Gastroenterology. There is an interesting case report of CMV jejunitis with jejunal perforation in immunocompetent host. Moreover, from our topic review, you will find a role of endoscopy in chronic pancreatitis.

We also have 5 original articles from our recently graduated fellows. The topic are various in many areas of GI diseases.

Finally, we would like to say congratulation to our recent graduates from passing the GI board examination; we wish they all will success in their ways and hope they will keep in touch with our GAT.

Duangporn Thong-Ngam, M.D.

The Editor in Chief

History Taking and Physical Examination in the Era of New Medical Technology of Investigations and Equipments



In the early period of modern medicine, the history taking and physical examination were considered to be the important evidences for diagnosis and management of the patient because the laboratory and imaging facilities were minimal and limited in the medical practice. Now the progression of medical knowledges and equipments have been rapidly developed especially during the past few decades after the co-operation of the doctors and different fields of scientists in interventions of those technics and equipments. At the present, there are many laboratory facilities to detect the abnormalities of any components in the patient's blood and the imaging technics which can detect the abnormality of almost every organ in the body. Then, the expense of the patient's investigations has been more costly either at the government hospitals, the private clinics or hospitals. All of the doctors accept that all those medical technics and equipments are very helpful in investigation and management of the patient's diseases or medical problems. After observing the medical records either out-patient or in-patient nowadays, I have noticed that the detail and important history taking and physical examinations are incomplete as if they were not performed prior to ordering the investigations which some of them were unnecessary. The arts of history taking and careful physical examinations are still the important informations leading to impression or diagnosis of the patient's disease. The new laboratory technics and medical equipments are helpful to confirm or support the diagnosis or to exclude the differential diagnosis. After gathering informations from history and physical examination of the patient the doctor will give the most likely diagnosis then differential diagnosis which may require further laboratory or investigation from sophisticated medical equipment which are costly in performing such tests or procedures. The doctors are not the technicians, so they have to consider the further investigations to confirm or ruled out the patient's problems from the costly investigation according to history and physical examination. They have to understand the pathogenesis or pathophysiology of the medical problems or disease well enough to consider the appropriate costly investigations. Otherwise any doctors, who are not the specialists, can order the new medical equipments which are not appropriated, and can diagnosed the disease with more expense than it should be. I agree that the new medical technologies and medical equipments are useful but they have to be used appropriately and reasonably because of their costs. Some one has said that "those who ordered never pay but those who pay never enjoy" This means that the doctors who order have not paid what they order but the patients or their families have to pay and may be suffered from their costs if those investigations are not appropriated.

The art of history taking, physical examination, behavior, attitude, politeness of the verbal communication of the doctor to the patient and family are also very important. At the patient's first visit, the doctor is a stranger to the patient and family, so the doctor has to explain to the patient and family regarding many questions or informations which may be the patient's personal information but such information may be related to the patient's illness. After their understanding, they will release those

informations and the doctor has to keep them confidentially. During interviewing the patient, I am sure that the patient and family will observe the doctor's behavior, attitude, politeness, talking, and opinion. If they feel confidence in the doctor's ability, they will co-operate with the doctor in management of their medical problems. This will also create good patient-doctor relationship which is very important in the medical practice.

After gathering history and physical examination, they have to be written in the patient's medical record. Some of negative history, physical examination or investigations should also be recorded because they are normal or negative but they are positive informations that the doctor can exclude some differential diagnosis or problems from the patient.

Do not forget that the doctors are treating the patients who are suffering from their illnesses, pain, discomfort and seeking the help to relieve their suffering. So the necessary expense of the patient to relieve their suffering or illness should be the doctor's policy. In order to achieve that goal, good history taking and physical examination are still the important parts of the doctor's performance. The appropriate investigations with new medical equipments and managements are also important and necessary in order to get rapid diagnosis or management. When the doctors have to order any expensive or costly investigations and treatments, they should also notify the patient and family about the expense especially at the private hospitals or clinics even at the government hospital, because the patient and/or family have to pay some expense of expensive management at the government hospital. So they will know that they can afford that expense or not. If not, the doctor has to seek and explain the outcome of those alternative management to the patient and family.

Hoping that new medical technology of investigations and equipments will not substitute but should be supplement the good history taking and physical examination for management of the patient, I am.

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