

Sheer passion for practice

Rita Doyle

“It seems like only yesterday” – an overused cliché – but truly when I started to count how long I was working in general practice I was astounded. Surely I could not be that old. Yes I am one of what the NEGs group call ‘the DREGS’ (only in jest!) but I don’t feel that way. My love, interest and sheer passion for general practice is as alive today as it was when I started.

I ‘fell’ into general practice. Our first child was born five weeks prematurely on June 30, 1977. Even in those days house jobs finished on June 30. I had decided that I was going to take six months at my own expense when he arrived – no such thing as maternity leave in those days – and I was plunged into motherhood on the night of the res party.

Three months later I was itching to get back to work when a friend rang me to say that there was a doctor in Bray looking for a part-time locum and since I lived nearby I might be able to oblige. So in October 1977, I started in general practice in Bray. It was to be for three weeks. I was doing my general medical membership and this would keep me interested until after Christmas.

John, my employer, was vocationally trained and had done his MRCGP. This was quite an unusual phenomenon in those days. He was truly inspirational and I became completely enthused with the job. I worked four mornings a week and Wednesday afternoon, which was his half-day. I was paid a sessional rate but was also given a percentage of the private

income. The fee was £2.50 for a surgery consultation and £3.25 for a house call. I often did seven or eight house calls, he having done maybe 10 or 12 before me.

We worked out of one consulting room. When I was there he was doing house calls, so the handover took about 10 minutes over coffee each morning. I learned all my practice management in those few minutes and the clinical discussions took place over the telephone. It worked well and I enjoyed it.

Three months went by and he asked me to stay. I did my primary membership but really knew that general practice was my future and so the relationship became a permanent one six months later. Consultations were every 10 minutes and Wednesday became the day when almost the total afternoon was for women. There were very few women in general practice and I was definitely sought for my gender rather than my brain.

It would not have been unheard of to do 10 smears of a Wednesday afternoon – all with the ONE speculum, washed yes but not sterile! Different standards for different days.

I worked one weekend in four and that entailed the husband having to stay in to mind the phone. He got quite adept at giving advice and I remember one Sunday afternoon when I got back to the house he said “Mrs X rang and I told her to go to Holles Street”.

“Why?”, I said.

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*Rita Doyle –
Kenmare leadership course bore much fruit for the ICGP*

“Ach”, he said, “it sounded like she was in labour and we decided that by the time you got back and went back to Bray again it might be too late”.

As it turned out he was right!

Child number two arrived 18 months later. I worked until the day before he was born and took three weeks leave – unpaid – and back to work. I was blessed with a housekeeper who came in every day and was tolerant of the inevitable late homecomings of a busy GP.

She stayed with us for almost 25 years and it was my privilege and heartbreak to look after her in her final illness. She never raised her voice to the children and life was as stable as it could have been for us all.

One Saturday morning about two years later, I got a call very early one Saturday morning from John’s wife. When I got to his house he was dead – only 42 years old. I still

remember his baby son shouting “dada” from the cot. This was a tragic loss to his wife and family, to his patients and to Irish general practice. The decision for me was to stop or to continue and so again I “fell” into full-time practice.

I was not happy to be away from my two sons all day so I worked every morning, and every evening when my husband came home I went back to surgery until 9pm. I had to cover every afternoon and often would put the two boys in the car and headed back to Bray to see someone who could not wait until evening surgery.

My secretary was a nurse and so she double-jobbed. I was not eligible for the GMS as I was not five years in practice. I had to survive on private practice income, and not unlike today, it was a daunting task.

I continued in the rota that John had worked in and the night and weekend work was very heavy.

I was irked that I looked after my colleague’s GMS patients gratis where they were always paid by my patients. I was the only full-time female in practice in Bray and I have no doubt that this worked to my advantage but I always felt I had to be better than the rest. I have no doubt that this added to the stresses.

Our first daughter was born a few years later. This time I took four weeks off and enjoyed every minute of it – again no paid maternity leave – but it was money well spent and about one year later we actually moved to Bray, bought a large house and relocated the surgery there. It worked like a dream and about 10 years later we did a major construction job, purpose converting the basement into a surgery.

I could tell many a funny story about the relationship between my children and the patients. I remember one of them marching into the consulting room, dropping her underpants saying “my knickers are wet” and walking out again, leaving my face very red and the patient in stitches.

On another occasion one of the boys hopped on to the windowsill and looked in at me to say ‘Hi’ as an elderly lady, whose granddaughter is now a GP, had just dropped her bloomers. I did not know whether to laugh or cry. Once I forgot to pick up one of the children from school. When the reality dawned on me I excused myself from the patient and when I returned 15 minutes later he was asleep on the couch.

I was introduced to the ICGP by a colleague. He persuaded me to join on the grounds that it was the ‘future for GPs’. How right he was and I became quite involved.

When the college ran a 'leadership' course in Kenmare in 1988/1999, my application was accepted. This consisted of three modules, each involving four days over a period of about one year. The tutors were Marshall Marinker, former director of the MSD foundation, an original thinker and a proponent of Michael Balint along with David Metcalfe, James McCormick and Michael Boland – a formidable lot.

The participants came from many parts of the country and all went on to be active in the college. Genny Maguire and myself are the only two remaining women who completed that course but people like John Latham, Paul Lacey, Garrett Hayes, Paul Stewart, Paul Money, Eamon Shanahan, Ciaran Donovan, Michael Griffin, Gerry Bury and Pat Durcan all participated. Annette Ellebert, who with Fionan was one of the first two people employed by college, was part of the secretariat. The late Fiona Bradley was there as was Philip Crowley – the youngsters on the course.

The course was held in a rather salubrious hotel in Kenmare and for me the outstanding memory was of meeting such wonderful open-minded and dedicated people under the guidance of four brilliant minds. It was a luxury but one which bore much fruit for the burgeoning college with many going on to become leaders within the ICGP.

I forged a friendship there with the late James McCormick and I later had the privilege to become his GP. He was inspirational and I have very happy memories of my friendship with him. It was hard at times to persuade him to my way of thinking but I will always remember the way he planted a kiss on my head on leaving the consultation and reserving the right to differ with his physician!

Within about a year I became a member of the college executive and was chairman of the board of censors for three years. This was an interesting job and I met many devoted and hard-working people. I will always maintain that of all the committees I had under my jurisdiction, the examination group was the hardest working and most dedicated of all.

The executive met on the top floor of Corrigan house on a Saturday and seemed to go on until Monday! And this was, at a minimum, 14 times a year. History has it that the odd member who had the audacity to fall asleep was engaging in risky behaviour. I vividly remember Johnny Lappin being allocated quite an onerous task while he was dozing!

Council then met four times a year – twice in Dublin and twice around the country – that was a full weekend affair. The

commitment was onerous, but I think bore fruit.

When the foundation programme for the college was launched I had no problem promoting and contributing to it. That is why we have such a sound institute today. It became a very sound financial institution because of the contributions of the members. Liam Lacey, our current president, nearly broke his back and his heart travelling the country preaching the Gospel of the college. Of all the wonderful committed people in college, he stands out as the one who really put the ICGP on a strong footing.

The CME tutor network began to develop and when a post became vacant in my own areas, I applied and secured the position – one which I held for more than 10 years.

This was truly a symbiotic relationship. There was, and still is an incredible group of GPs in the Wicklow/Arklow area to whom I went on a Monday night for 10 months of the year.

At first we met in a sitting room over a pub; then we met in the snug of another pub and then finally, we alternated between two hotels. I have vivid memories of using the prostate model in the back of a pub. If anyone had seen us, we might have been arrested. These people were so challenging and such quintessential GPs and I learned so much from working with them. Still when we meet I feel there is a special bond and they greet me like a long lost friend.

I remember those long lonely drives home around midnight and my brain would be so active that I could not sleep properly. My poor husband would wait up for me and we would often talk on until I had wound down

Education was always my first love. Being a member of the CME network introduced us to WONCA and to our European colleagues which was fascinating and rewarding. We preached and introduced small group education to our European colleagues.

I personally became bedamned with illness at that stage of my life. Imagine the dreadful thought of being a patient. I was fortunate in having a wonderful GP who supported and helped me through about five very difficult years. I then turned the job around and it was my privilege to look after him in his own terminal illness. Ar dheis de go raibh anam dhilis.

So to the twilight of my career. I still work full-time and am now a trainer in general practice to the Trinity Training Scheme. I am a grandmother to two little boys, mother to five children and wife to my husband. What more could a girl want?