From the Editor's Desk

GOOD MANNERS AND DOCTORS

The holy grail of medical education is to discover the formula that will predict, with reasonable accuracy, which students will become caring and compassionate doctors. In pursuit of this ideal, medical courses have embraced the humanities in an attempt to produce empathic and reflective doctors. At the other end of the spectrum, medical education has concurrently promoted evidence-based medicine — or EBM.

But, interestingly, we now find there may well be another kind of "EBM" to confound us.

Michael Kahn, a Boston psychiatrist writing in the *New England Journal of Medicine*, has proposed that "etiquette-based medicine" may be important.* It was his experience as a patient of a European-born surgeon, whose manners were imbued with the distinctive formality of the Old World, that impressed him. This encounter confirmed Kahn's suspicion that *"patients may care less about whether their doctors are reflective and empathic than whether they are respectful and attentive"*.

Kahn's recipe for etiquette-based medicine, especially in hospital practice, is:

1. Ask permission to enter the room; wait for an answer.
2. Introduce yourself, showing ID badge.
3. Shake hands (wear glove if needed).
4. Sit down. Smile if appropriate.
5. Briefly explain your role on the team.
6. Ask the patient how he or she is feeling about being in the hospital.

Kahn concludes: *"We should continue our efforts to develop compassionate physicians, but let's not overlook … emphasizing good behaviour … It would put professionalism … at the center of the clinical encounter"*.

However, there could be an unexpected twist to etiquette-based medicine. As Evelyn Waugh once cynically noted in British newspaper *The Observer*, good manners may well have an inbuilt bias: *"Manners are especially the need of the plain. The pretty can get away with anything."*

Martin B Van Der Weyden

*Kahn MW. Etiquette-based medicine. *N Engl J Med* 2008; 358: 1988-1989.