

Clients on diets

So we worry about frightful epidemics, on television and in the newspapers, about the Black Death coming back or variola major rising from the dead, forgetting, in the midst of our recent preoccupations, about the deadliest scourge of all, more lethal than handguns and automobiles and anthrax all put together. It is food, food, the stuff that in the Hindu Kush we drop from planes in yellow packages but that here is a pathogen, causing this terrible epidemic of obesity, of coronary heart disease, of type 2 diabetes.

And so it came about, some 10 or 15 years ago (according to notes I found in an old file, and that I had made for a "Letter from . . . Chicago" that was never written) that the phone rang while I was in the middle of a busy outpatient clinic.

"It's about my client for whom you prescribed an 800 calorie diet."

"You mean my patient," I interjected.

"Well, we call them clients," the voice said. "I think 800 calories is too little for my client."

Defensively I suggested that 1000 calories might be sufficient to keep this 270 pound woman in metabolic balance.

"No," said the voice, "at 1000 calories she will still need supplements; 1500 calories would be better."

"Would you please do as I asked you?" I ventured.

"Oh no," she said, "you do your doctoring, and I do the diet counseling."

By now I could have hit her, had she not been at a safe distance. Instead I asked for her name, saying I would speak to her supervisor, whereupon she slammed the phone in my ear, and I let the matter go.

My feelings, moreover, were compounded by a certain amount of guilt, because somewhere in the dim past I was taught that it was the doctor's job to counsel patients about their diet. But things being as they are, I must also add that I have always felt sorry for dietitians because, despite their best efforts, most patients will still eat whatever they please.

I also find that many dietitians imagine indeed that we are in the Hindu Kush, and are more worried about starvation and deficiencies than about obesity. But I have stopped arguing with them. I now tell my overweight patients to listen politely, but then to eat half of what the dietitian prescribed.