

Letter from Chicago: At night

You live in a fine house with elegant children and obedient furniture when suddenly, in the first sweet sleep of night, you develop severe pain, perhaps accompanied by calor, rubor, tumor, and angor. How will you cope with this predicament under various circumstances in various parts of the world?

(1) If you should happen to be the emperor of China, a high ranking samurai, or the president of a multinational corporation, you may reasonably expect a sleepy doctor to arrive with his black bag to assuage your symptoms.

(2) If the above fortunate circumstances do not apply but the house call has not yet become extinct in your part of the world, a general practitioner may still come to see you. He may have a hard time examining you in a bad light in the middle of a sagging bed, but may nevertheless be astute enough to diagnose your leaking ulcer or classical panic attack.

Working your way down the algorithm, you may possibly have an influential friend or relative who knows a doctor willing to come in the middle of the night, even if merely to determine that your dolor and angor are greatly exaggerated.

(4) You have neither friend nor relative nor influence. But you know of an agency

that sends itinerant young doctors to take care of nocturnal true or pseudo emergencies.

(5) You could not get a doctor, young or old, to come to your house for all the gold in China, let alone in Japan, but a general practitioner will meet you at his surgery and at least examine you in a decent light and not in a king size bed.

(6) You could not get a doctor even if the entire Tokyo stock market crashed, but you can try your luck on the phone.

(7) You're on the verge of success. Unfortunately, the chap on the other end of the line does not seem to care even if you were the emperor's eldest son.

(8) The phone is "manned" by a formidable nurse practitioner whose job is to weed out the worried well—thereby increasing your angor and activating considerable furor.

(9) There is nobody to answer the phone, or your phone was disconnected because you did not pay last month's bill. So you get in the car and drive to the nearest emergency room.

(10) You don't have a car, it will not start, or it was repossessed for non-payment of due instalments. Your neighbour is in the same boat (with his car). You decide to take a midnight walk (in some neighbourhoods your last). Or call an ambulance that will charge more than it would cost to fix up both cars and possibly the boat as well.

(11) You are met by a stony faced clerk who wouldn't care if you were the dowager empress herself. You wait for hours to see the intern, a heavy sleeper. He orders every test under the rising sun, takes four views of your tumor, and sticks a needle in your rubor. He asks why you did not call your personal physician in the first place. He then phones his attending physician, who is at a poker game and of course does not know you from Adam's mother in law. You may be admitted to the hospital, a process that may be completed by sunrise, or you may be told to see your own doctor but come back if you don't get better.

(12) The meta-analysis is completed. Statistics indicate with a high degree of confidence that you should avoid getting sick outside regular business hours. You may safely read Shelley but do not arise from dreams in the first sweet sleep of night —
GEORGE DUNEA, *attending physician, Cook County Hospital, Chicago, USA*

