A time to think

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Do you feel tired, fed up, dispirited? Then you need a change; a change from the daily routine of overcrowded outpatients clinics and too few beds for patients to be investigated and treated; from having to deal with over-tired junior doctors and the unpredictable presence of her (or him) who used to be your ward-sister; from your consultant colleagues who seem less amiable now than when you first joined the consultant staff (they probably have similar problems to your own); from the hospital administrators who don't seem to love you any more.

What you need is a few months sabbatical leave to break the vicious cycle of having too much to do with too few of the resources you feel you need just to keep from drowning while the tide of change sweeps over you. But who in medicine has a right to sabbatical leave? In many countries, notably Australia and the USA, sabbatical leave for senior academic and clinical staff is an established custom; it benefits the sabbatarians, their own departments and those of their hosts if they decide to make this break elsewhere. Sabbatical leave is not intended to be a holiday for lazing in the sun or for idle sightseeing; it is a period for refreshing parts of the spirit and the intellect that have had to lie dormant, and for repairing those that have become exhausted through overuse. It gives time to think, untrammelled by the daily responsibilities connected with the job, and to experience the rejuvenation occasioned by attending a constructive series of lectures on a new subject and even taking (and passing) an examination; it gives some the pleasure of reviving forgotten skills at the laboratory bench and those who are more adventurous may seek to face the challenge of preparing a research protocol for scrutiny by their peers to obtain a personal research grant. A reasonable period of sabbatical leave, say four to six months every four to six years offers a sufficiently long break from stultifying routine to plan for oneself a programme of continuing medical education that will be more enjoyable and interesting than a series of short release courses with little escape from the deferred obligations.

Which hospital trust will show the way and include sabbatical leave in its consultant contracts?

ROBERT MAHLER

Editor