First, Do No Harm: Being a Resilient Doctor in the 21st Century


The aim of this book is to help doctors become more resilient to burnout and stress. It might equally have been called 'Physician Heal Thyself' or 'Self-help for Doctors', though the latter wouldn’t be the most appropriate title since doctors rarely think they need help.

The book describes eight principles for resilience, namely: (1) make home a sanctuary; (2) value strong relationships; (3) have an annual preventive health assessment; (4) control stress not people; (5) recognise conflict as an opportunity; (6) manage bullying and violence assertively; (7) make our medical organisations work for us; and (8) create a legacy.

The book does not directly follow this plan but approaches the subject by looking at doctors’ relationships with themselves, their doctor, family and friends, colleagues, patients and the environment.

Most chapters contain the sort of self-help material found in standard self-help books. However, few doctors read self-help manuals while the emphasis of modern medicine is on communication and ethics, which may explain the title.

The chapter on looking after physical health is good, as is the emphasis on registering with a local GP with whom they can build a therapeutic relationship.

Doctoring doctors is a difficult area and needs more than two paragraphs. Many doctors still prescribe strong medication inappropriately for themselves, including antidepressants and sleeping tablets. Meanwhile the punitive approach of the General Medical Council to mental health means many doctors prefer to keep quiet rather than admit to a mental health problem.

The book touches on our relationships with our medical organisations but avoids the difficult questions of why medical leadership is so poor. Leading doctors has been described as herding cats. Poor medical leadership is one reason that doctors behave more like state-employed applied pharmacologists rather than independent professionals.

The book reads more like a ‘one-minute guide to self-help’ than a book specifically for doctors. Its advice applies to most professionals, including athletes, executives, lawyers and teachers. I liked the chapter on health, but overall the book touches too briefly on too many areas. For example, there are only a couple of paragraphs on ‘difficult consultations’. This topic is too important to skip over and I recommend a classic text such as The Inner Consultation by Roger Neighbour.

It is disappointing the book does not look more closely at the reasons why more than 50% of doctors are dissatisfied with their career choice. Never have doctors worked fewer hours, had more stable lifestyles, better terms and conditions, more safe and effective drugs at their disposal and yet so many of them are unhappy.

Above all, I was disappointed that First Do No Harm does not describe the resilience that comes from practising a discipline to the best of one’s ability at the highest possible standard. Or mention the satisfaction that comes from an ordinary doctor’s capacity, through the judicious combination of science and art, to daily work simple miracles.

Medicine is part of a healing tradition that stretches back for thousands of years. In this tradition, the doctor and patient grow together by learning about each other as a therapeutic team. And in that tradition, healing gives its own unique protection from the ordinary stresses of everyday life.

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