



Consultant Psychiatrist at Southern District Health Board, and ASMS Otago Branch President.

Five minutes with Chris Wisely

What inspired you to become a doctor?

I used to love reading about science when I was a kid, about people who discovered things, chemistry and so on. Both of my parents were zoologists, New Zealanders who were working in Australia, which is probably why I learnt to swim in a pool of Port Jackson sharks when I was three. I remember an octopus came up and took my red ball.

My father went on expeditions and my mother did parasitology at one stage. I just thought it was normal to be given worming pills every six weeks.

So the science background was there and the interest. We moved to New Zealand when I was five and I decided early on that I was going to be a doctor, and that's what happened. As to why I didn't become a zoologist, well, I remember thinking that it was easier to talk to people than animals.

Auckland University interviewed me when I applied for medical school and beforehand I had to choose an area of interest, so I chose psychiatry without knowing much about it. I read the book *Battle for the Mind* by William Sargant, about the effects of shellshock, and it just so happened that the person who interviewed me had read the same book so we started talking about that and it all went very well.

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After training at medical school, I did two years as a house surgeon and six months general practice. I'd intended to go overseas but the bottom fell out of the sharemarket so I had to do something else, and I spent that time in general practice. It was very good. I developed a real respect for the people who work in general practice, especially their knowledge of when to wait, when to watch, and when to send someone to hospital.

I went over to England after that, in about 1988, and fell into doing my higher training in psychiatry, then I came back to Dunedin and got a job with Paul Mullen, a Professor of Psychiatry. I remember talking to him on the phone before I got the job and for some reason I thought he was one of the managers. I was swearing and all sorts, then I asked him what his name was. He told me and I

said, isn't that funny, you having the same name as the psychiatrist! There was silence on the other end of the phone. Eventually it clicked.

I told him then that I wanted to work with him and could he find me a job in Dunedin as quickly as possible, which he did.

I started at Dunedin Hospital in 1991, working in forensic psychiatry initially, before becoming a consultant.

What do you love about your job?

I love talking to people. Really, I do. You have a chance to shape a person's whole life rather than just being an ambulance at the bottom of a cliff. You can talk to them about the meaning of life, their spirituality and purpose, as well as the physical issues such as thyroid or diabetes.

At the end of the day it's hard to define clinical wisdom, but it's about knowing when to act and when not to act.

You form extraordinary relationships with people and you can make a real difference. People only feel down or depressed if they feel they can't do anything about the situation they're in. Sometimes you'll say something that makes a difference, you don't know what it is but it ends up changing things for the person.

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My wife, Jubilee Rajah, is also a psychiatrist, working in student health. It really helps being with someone who works in the same field and knows what it is like.

What is the most challenging aspect of practising medicine?

It annoys me when I have someone I need to admit and they don't have the beds available. If someone needs an assessment, they shouldn't have to be at the point of suicide or homicide to be observed and assessed.

In his spare time, Chris Wisely takes photographs, swims, plays table tennis, learns Maori, and walks his dogs.



A lot of the people we see do not have a support structure. We used to get people in the hospital for a while and observe them, but now it's very much in and out in a hurry. It's still very valuable to be able to have a really in-depth clinical assessment over time.

One of the most challenging things is when we don't have a good working flow with our management or when colleagues attack each other when they feel stressed.

The future focus will certainly be nutrition in all its facets – the use of tailored diets to treat conditions and watch out for viruses (the dark matter we know little about even though almost 50% of our genetic material is viral in origin).

Why did you decide to become a branch officer for the ASMS?

An anaesthetist called David Bowie (yes, the same as the singer) asked if I could go along to a union meeting to discuss the contract because he felt bullied by the managers. That was in the mid-1990s. I went along and at one point I took exception to one of the managers' comments that doctors have no idea about budgets.

Then David Bowie told me he was going to Christchurch and could I take over the union role. So that's what I've done since then.

What have you learnt from this experience so far?

The importance of having a good long-term plan and sound principles on which to build a sustainable health system.

It's about making connections and supporting each other.

What looks like union wrangling to some is actually about setting the conditions and shaping health policies. You've got to have that, without it we'd be in total chaos.

One of the things I love the most about the ASMS is the annual conference. It's the one time I get to see my colleagues from all different branches of medicine gathered together in one place. It's fantastic being able to talk to other doctors, sharing problems, and finding out the latest developments.

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