

Sick soap syndrome

Recently I turned on the television to see a baby dying under a surgeon's knife. It wasn't a horror film, nor a medical soap like *Holby City*. It was a reality TV docu-drama following the separation of conjoined twins.

A live death

In 2004, Egyptian baby Manar Maged was born with craniophagus parasiticus – with a parasitic twin attached by its head to her own head.¹ She was otherwise physically normal, but her twin had only a head and neck stump. Though capable of blinking and smiling, she was entirely dependent on Manar for circulation and nutrition.

The parents were told that Manar stood a good chance of surviving the operation, but that her twin would inevitably die during the surgery. So, in February 2005, with a video link broadcasting every cut of the knife around the world, Manar was separated from her twin, who died live on air.

Although the operation was hailed a huge success, Manar herself died the following month, but not before she had been paraded around the world on a fund-raising roadshow, culminating in the USA on the Oprah Winfrey Show. Her twin was buried in a private ceremony in a Muslim cemetery and at last afforded the dignity and respect given to more 'normal' dead babies, that she was denied during her dying moments. The final grisly BBC headline read, 'Two-head girl dies of infection'.²

How did it come to this?

How on earth has our society come to find these trying events entertaining? Maybe it all started with the gritty pseudo-reality of soap operas. But the new millennium saw us embracing *Big Brother* – a live soap opera without the overpaid actors!³ Instead, ordinary people sat at home watching other 'ordinary' people doing everyday things. Strangely it was a massive hit, though a huge waste of the nation's leisure time! Then the floodgates opened, countless other reality programmes followed, and it's now possible to spend 24 hours a day, seven days a week, immersed in so-called 'reality'. Lately the concept has evolved still further: reality TV has merged with the seedy world of chat shows and given birth to so-called reality docu-dramas. Now ordinary people get to divulge intimate details of their problems to the rest of the world: their gross obesity which requires us to watch their bariatric surgery; their children's physical and mental disabilities and how other people react to them; even the finer points of their emotional turmoils, sexual deviances and relationship breakdowns. And in the background of every programme, another kind of *Big Brother* keeps up a running commentary, to make sure we really engage with these troubled souls.

What are we learning?

Programmes like *Big Brother* are simply huge tabloid gossip machines. So, as Scripture warns us away from gossip, it's easy to make a case for avoiding watching them.⁴ But what about so-called docu-dramas? After all, many of them are billed as educational! Doesn't each one tell

the story of a person affected by a specific medical, emotional or mental illness? Well, yes, but that doesn't mean that society learns anything useful from them. What did we learn by watching Manar's twin die live on air? What do we gain by observing the gory details of a grossly obese person's gastric bypass? And how much do we benefit from witnessing the breakdown of a person's marriage?

In this day and age, there are huge resources for the general public to obtain objective medical knowledge and opinion. Gleaning subjective information on rare diseases from distressed individuals is neither necessary nor advisable. Moreover, our recent national obsession with docu-dramas is feeding our emotions and making it appear 'normal' to put private issues out on public display.

Consent

Back to Manar. Of course, neither twin was capable of giving any kind of consent. Moreover, it could be argued that their parents were not in a position to make a truly informed decision about filming either. However, the surgical team most certainly were in a position to ponder the rights and wrongs of the proposal, and I wonder how on earth they justify their decision.

But what about the plethora of individuals who agree to have their distress and illnesses broadcast across the world? Are they truly receiving informed consent counselling beforehand? Moreover, are the doctors involved really acting in the best interests of their patients? Despite the fact that most participants in reality docu-dramas are adults, by no means all of them could be said to be of sound mind. And what about the children? How many parents are sitting in front of cameras, telling the nation about their child's ailments, when the child is too young really to appreciate the potential consequences of their parents' actions.

Our response

Should we be concerned that society now feels the need to know and discuss everyone's intimate secrets? Well, yes we should. The Genesis account of Shem and Japheth's concern to protect their drunken father's dignity, in contrast with their brother Ham's voyeurism, is a sober reminder to us that some things are best left unseen and unreported.⁵ As doctors we are granted access to the most intimate details of our patients' lives, but *only* with a view to helping them overcome or cope better with their problems. In so doing we should grant them the same respect of privacy that we would wish for ourselves. Condoning the broadcast of distressing personal situations is simply pandering to the morbid fascination of our channel-flicking entertainment culture, and a serious abuse of professional privilege.

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references

1. *BBC News* 2006; 21 February
2. *BBC News* 2006; 26 March
3. www.channel4.com/bigbrother/
4. Proverbs 18:8; 2 Corinthians 12:20
5. Genesis 9:20-27