Romancing the grape

by Chris Ellis

There are several difficulties the drinking general practitioner experiences in a small community and one of them is visiting the bottle store to get his own supplies. I always seem to meet my patients there, especially the ones I have just given a prim and holier-than-thou lecture on their vinous indiscretions. They in turn have usually promised the previous day to become reborn alcoholics or whatever you call resting livers.

In our village one has to allow some time for the visit because our local bottle store owner is a very loquacious man. I usually find I have walked to the door about three times before eventually getting out. He has the knack of engaging one in unfinishable conversations.

It was only the other day that I was ordering among other things a bottle of Captain Morgan’s Rum (for it’s remarkable curative properties) when he fixed me over his glasses with a knowledgeable look and said: “Do you know, Doctor, the women don’t like the men drinking this stuff?”

Now I didn’t find this statement really warranted a mention in this year’s section on recent medical advances but in the interests of research I warily replied “No, Why?” “Well,” he said through pursed lips, “they can smell it on their body odours.”

I can’t quite explain how he said the word “odours”. It crept out with a twitch of his alar nasae. I was on the point of answering when I checked myself. I was about to be drawn into an indepth analysis of the rum concentrations of various secretions.

One day I might go in and ask him if by chance he has got something that has a carefully nurtured languidness with a slender elusive bouquet, subtle yet beguiling with a lush complexity that haunts rather than lives on the tongue before clearing the sinuses on its way down.

Perhaps he will give me a bottle of Captain Morgan’s Rum straight away.

Everyone enters a bottle store in a different way. There is a form of human social interplay depending on who you meet and a difference of approach between amateur and professional drinkers. The amateurs come in and chat away about the wife and the weather, but the serious drinkers have a silent communication between themselves and the proprietor behind the counter. The exchange often takes place in total silence. The proprietor disappears and returns with what is needed and the bottle is transferred in a brown paper bag with the efficiency of an oft performed ritual.

Now at my recent visit to stock up for the festive season I was standing at the counter when one of my alcoholics comes in. In my thesis on “Behaviour Patterns of Customers in Bottle Stores, Personal Studies on Irregular Occasions”, I have stated that there are three avenues of action that the incoming traffic can take on occasions like this.

The first one is an athletic response. There is a reversal in direction with a speed not in keeping with the nonchalance of the entry. The second course of action is taken if the entrant is too far committed before he notices me. This involves shuffling the feet sideways and averting the gaze until he assumes an invisible stance at the far end of the store and becomes absorbed.
in the fascinating texture of the wooden counter. My patient took the third option as I had already greeted him thereby closing option number two. The routine now goes something like:

"Hello, Doc, are you off duty. Didn't expect to find you in here, ha, ha, ha..."

It's on occasions like these when I wonder whether I shouldn't give up drinking altogether but then I might succumb to the three conditions that beer drinkers fear most when they give up... loneliness, boredom and constipation.

Drinking has always been a comparative and subjective occupation especially to doctors who tend to define an alcoholic as someone who drinks more than their doctor.

This all puts me in mind of a research trial performed one evening in the springtime of youth. The venue was The Lemon Tree, our medical school public house, near the Charing Cross Road. Some of the students from the North of England maintained that beer tasted better out of straight pint glasses and that those of us from the South where an affected and pretentious lot in our tweeds and cravats sipping prissily out of our fancy mugs with handles.

Teams were drawn up out of the tweeds and cavalry twills on the one side and the Northerners with their shirt sleeves rolled up on the other. Straight pint glasses and mugs with handles were lined up on the counter and some serious clinical research was got underway. The trial progressed with due diligence and attention to bias and statistical analysis (the barman was the referee and did the counting).

After much smacking of lips and delicate belching the foam was wiped off the moustaches and a consensus was reached. It was decided that the beer tasted better out of the straight glasses... for the first four pints... and then for some obscure reason the elegance of the bouquet and the exquisite texture of the body seemed somehow more difficult to appreciate. The clarity of expression in summing up might have suffered at this juncture because some team members had developed speech impediments. If I remember rightly it became a true double blind trial. I'm not sure, what with the passage of time, but I believe there was some distortion of the rigid trial protocol due to outbreaks of singing. Well, I've got my stocks in so I must continue the research. I'm still not convinced.

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Rooms 24/25
Medical House
Pinelands 7430

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SA Akademie van Huisartspraktyk/Primêre Sorg
Kamer 24/25
Mediese Huis
Pinelands 7430

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