

I am currently enjoying a somewhat strange reading diet of 1950s science fiction. It's a pleasant, albeit curious, way of passing the daily commute that doesn't overly challenge the intellect and gives an amusing opportunity to compare some of the futures anticipated by authors of 60 years ago with the realities we now know.

I found the concept of space travel to Mars and Venus by 1997 somewhat naively ambitious, but another author's concept of a eugenics programme to limit the cost of healthcare brought about by an expanding and increasingly ageing population was far more imaginable and hence chilling. Chilling because the book had been written less than 10 years after the birth of the NHS and although it had anticipated the consequences of human expectations and financial sustainability of unlimited healthcare free at the point of delivery, the solution was the product of a corrupt and dystopian society.

An unprecedented and unsustainable demand challenging the current funding envelope is the reality we now face and the primary objective of the varied and multiple modernisation plans is to ensure our healthcare remains free at the point of delivery, without bias or discrimination. Technology and the genomics revolution are going to change healthcare massively over the next 10 years and lead inevitably towards the management and reduction of risk of disease to reduce the need for treatments and cure.

I know that pathology is facing pain and uncertainty as it undergoes

STRANGER THAN FICTION



With massive change on the horizon for healthcare, diagnostics has a key role to play in the future.

reconfigurations and consolidations and I am fearful that the enthusiasm for cuts will damage the very service that will be helping deliver the prevention based medicine of the near future; diagnostics, I am convinced, will be the key to delivering targeted and affordable healthcare. The apparent inefficiencies that are thought to still exist in pathology are nothing compared with the bigger inefficient systems whereby patients are kept in hospital longer than is required because of limited availability of imaging services outside core working hours, the multiple individuals and departments that still seem to operate as isolated episodes in what is supposed to be a continuous care pathway and the lack of social care that delays discharge for many. Our future will

be determined by brilliance and innovation and impeded by bureaucracy and administration.

I'd like to finish with an anecdote that has come to mind through my literary foray into imagined futures. I was at a meeting around five years ago where a senior advisor to the health departments stated that "we won't be using microscopes in five years time". OK, so maybe space travel to Venus and Mars by 1997 wasn't such an outrageous projection.

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