



Is retirement bad for your health?

"Come grow old with me, the best is yet to come"- William Wordsworth

There is an extraordinary concept in the retirement industry called "dying too late", which refers to those who live too long after retirement and run out of funds. I believe this is a worry that most of us have. Many people can now be retired for up to 20 or 30 years. This is partly because people in rich countries are starting to live longer, thanks, in part, to statins, angiotensin-converting enzyme inhibitors and aspirin, but also because they are starting to retire earlier, in larger numbers. Apparently, the lowest average age of retirement is in Luxembourg, where men are retiring at 57 years, although the official age at which to receive a pension is 65. Demographers now talk about the "young old" who are in their 70s and 80s and still in reasonably good shape, and the "old old", who are in their 90s and 100s, who are mostly frail and in need of care.

There was no concept of retirement with respect to the working man or woman until 1899, when Otto von Bismark famously introduced the world's first pension scheme in Germany. Until then, you toiled in the fields until you dropped in front of the plough.

When is the best time to retire? There does seem to be a correct time to retire, which politicians, who grip onto power at all costs, seem to ignore. Some doctors close the books while they are clear of eye and strong of limb, and can walk straight onto the golf course, while others continue to practise in various limited ways. Many doctors shut up shop, cancel their memberships to medical associations and never want to hear about medical practice again. This seems to happen to doctors who have worked in government systems, like the National Health Service in the United Kingdom, where many doctors can tell you exactly how many years, months and days are left until their retirement.

Yet many, especially here in South Africa, continue to enjoy medical practice late into life. A colleague in Johannesburg told me that he had returned to his old practice to conduct a short locum after he had retired, and said that he had forgotten about the "stroking" that

grateful patients gave him and the fellowship of practice life. It is the reaffirmation of one's status and the recognition that is often endemic to medical practice.

I was in practice for many years near the Natal Drakensberg mountains, and new patients, almost weekly, would arrive from Johannesburg to retire in their idyllic cottage in the mountains. They would spend a year doing up the garden and their friends would come and visit them once, and once only. After that, they would look at each other and ask: "What do we do now?" They had followed the myth that one should retire in the country or down at the coast, when it may be better to retire in the city, where amenities, healthcare facilities and transport are available.

I became aware of the effects of retirement when my senior partner retired at the age of 65, and another general practitioner from a distant village also retired, at the same age and same time. The one doctor retired to his farm in the Free State (it was still Orange in those days), and continue to practise from his farm and lead an active social life in Rotary; and the other doctor retired completely to a life of reading books, pottering around and gardening.

I met them both a year later, and the one who was still practising was as bright as ever, and interested in current affairs and busy with social engagements. The other doctor sat quietly on the sofa and occasionally joined in the conversation. He had slowed down and was taking life as it came. And here's the rub. I could not tell who was happier.

Do we keep on dancing on the stage like Mick Jagger, or quietly give ourselves permission to take our feet off the peddles? In the end, health and economics permitting, it is an individual choice.

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