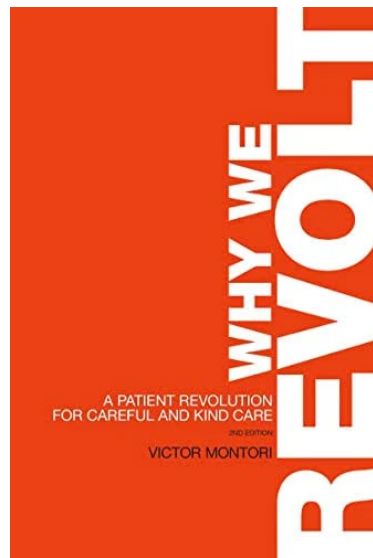


Why We Revolt

A transatlantic resonance and warning



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For several decades reformers to our NHS have attempted piecemeal emulations of the USA's healthcare system, for example by instituting commercial market tariffs, trade and competitive tendering. *Why We Revolt* is a remarkable manifesto opposing such a system: it is written, very significantly, by an eminent USA physician.

Why We Revolt is surprisingly anomalous and paradoxical. From a bastion of USA-bred hi-tech medicine an eminent and respected physician has broken out to argue for a more democratic and humanistic bedrock of humanistic medical practice.

Victor Montori is a Professor of Medicine at the Mayo Clinic, Minnesota. He is a prodigious researcher, author of numerous academic publications, champion of evidence-based practice and lead diabetologist. The Mayo Clinic's funding comes – like most USA healthcare – from private citizens or their insurers, yet very substantially and exceptionally added to there by enormous charity donations, mostly from USA billionaires. The Mayo Clinic is therefore extremely well-resourced to continue its high-prestige technical excellence. Victor Montori thus occupies an enviable pinnacle in the medical establishment.

Yet Montori has, for many years, developed a sceptical dislike of the USA's ambient medical culture and direction that have conferred his distinguished livelihood and success. In 2017 he first published this manifesto *Why We Revolt*, to fuel his reforming movement *Patient Revolution*. The book has been subsequently revised as the movement has grown. Although he writes primarily from and about the USA system, many of his observations and suggestions are well-nigh universally applicable to the way the medical model now has gained increasing unmitigated hegemony worldwide.

Montori's observations of how commercial business interests override or neglect human and care considerations are particularly true of the USA, yet growingly problematic here in the UK. Capitalistic influences are harshly, often brutally, determinant in the USA; in the UK they are, currently, more stymying and corrupting ... but, we fear, increasingly so.

Why We Revolt is a personally committed manifesto written with warmth, candour and grace. Intellectual heft is softened by interlaced humanly tender stories, sometimes suffused by the poetic. Such engagement steers well clear of any headache-inducing polemic that kindred mission-themed books so often inflict.

Rather than summarise Monton's experiences and notions, let us hear from him directly:

In 2020 he correctly prophesises:

The post-pandemic economic crisis will argue urgently for deepening the industrialisation of healthcare, for making healthcare more efficient, standardised, artificial and generic. More profitable and less caring.

By which he means:

It standardises practices for patients like this, rather than caring for this patient. Efficient specialisation and narrow job definitions drive industrial healthcare's focus toward organs, diseases and test results. Rigid protocols and fear of deviating from them miss the person. Systems that prioritise access and volume place very little value on the length and depth of the interactions between patients and clinicians. Forcing encounters to be brief and shallow speeds patients through consultations in which clinicians cannot appreciate their patients' situation fully...

The harm is done not only to patients. Industrial healthcare is killing the healer's soul. Enforced productivity depletes clinicians. Under efficiency pressures, clinicians cannot draw meaning from fleeting patient visits.

So, his mission:

My goal is to persuade you that we must transform healthcare from an industrial activity into a deeply human one, capable of providing careful and kind care for all ... [and to] convey what makes industrial healthcare a profoundly undesirable development in society ... That is why we revolt.

He pragmatically recognises the necessity of fiscal competence and adequacy in any healthcare, but:

Business discipline is essential: No money, no mission. This phrase, however, has a different and corrupting meaning for the healthcare industry; money has taken over as the industry's raison d'être such that patient care should happen only where it makes business sense. Money has shifted from a resource for patient care to the product of healthcare.

So that:

Where there is more money, healthcare companies find more missions.

He is sceptical of competition in healthcare:

Magical powers are attributed to competition, including improvements in service experience and lower prices. For many reasons, this is not often the case. Rather competition will attract and find reasons to push patients through their services to achieve financial targets.

The antithesis?

To care, it seems to me, clinicians must be able to slow down. As a patient, I should feel what matters to my clinician is going on right now, not tomorrow, not with the next patient, or with the one that left earlier.

But this healing and creative freedom cannot exist:

where the invisible hand of the market controls healthcare ... the extraction of excessive profits by investors starves the system of resources needed to support careful and kind patient care.

He is opposed to the 'customer service' ethos now so often replacing traditional care, for such erstwhile care:

... is not giving patients what they want, as if they were consumers or as customers of our business. It is not giving patients information or a menu full of choices and leaving them alone to sort out what is best for them. Shared decision making is a human expression of care.

In expediently excluding the vital nuances of personal relationships and understanding, commercialised and industrialised healthcare, policymakers:

selected easy-to-collect markers of guideline adherence of dubious importance – easy to collect electronically but of limited meaning to patients – and used these to judge quality of care... Industrial healthcare deployed a degraded version of evidence-based medicine to hold

clinicians accountable for complying with what is recommended for patients like this, not for figuring out what is best for this patient.

Montori writes of the art of healthcare:

Care is what patients and clinicians create. You can read about dance, hear the music, and see a chart with the steps, but dancing starts and ends with the dancers' bodies responding to the music and to each other. You can be thrilled by their moves, but catch the dancers' eyes and you will have to accept that only they are dancing. Care is intimate ... Imagine the despair these clinicians and their patients feel when they realise they have no control over the music, that others determine the choreography.

The destruction of this art by the compliance demanded by our increasing corporate control is especially stark in the capitalistically enthralled USA. Victor Montori reflects on this desolation:

In this system the flow of information and value streams upward, from the clinical encounter to the corporate office suites and, from there, to the payers and investors. Patients may seem to be at the centre of this system, but this is not patient-centred care. Rather, the care that patients and clinicians co-create is the product that the healthcare industry packages and sells and that payers buy. In this factory, as clinicians lose control, they also give up responsibility for the downstream consequences of their actions on patients and society, the hallmarks of professionalism. Patients and clinicians are merely instruments of the system with little power to determine the conditions of their work.

Here in the UK we do not (yet?) have the intimidating chokehold on healthcare that

commercial interests now exert in the USA. But, unless we are vigilantly determined to resist it, this may well be our fate.

Meanwhile older practitioners and patients will see clearly how 'the system' has already incrementally destroyed or dissolved the kind of personally attuned care they often found so valuable.

Victor Montori, a distinguished practitioner in an even more morally blighted healthcare, has a message for us here of great resonance and prescience. His evidence is chilling, but his intelligent and compassionate defiance is heartening. It certainly deserves our most thoughtful attention.

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Why We Revolt. A patient revolution for careful and kind care (2nd edition). Victor Montori, (2020). Mayo Clinic Press.

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