When giving post-operative advice to older ophthalmic patients who have a spouse in tow, I often feel like a stand-up comedian with the audience in the palm of my hand. I deliver my catchphrase, follow it with a dramatic pause, then wait. ‘Take it easy for a few days’, I say, and the response is as predictable as a scratch following an itch. If the patient is male, his wife will say: ‘That’s all he ever does.’ If it is a woman, her husband will ask: ‘Who’s going to make my tea, then?’

This is all delivered in a rolling Hampshire burr, with lots of laughter and good-natured banter about ‘men’. We’re nothing but politically incorrect in our neck of the woods.

I often find that banter helps patients and relatives relax after the ordeal of eye surgery, but despite the stereotypes, it is still a serious point. It is easy to underestimate the importance of resting after invasive procedures. The trauma is not just physical; the anxiety and upheaval can take it out of you. For some, the sheer effort of getting to the hospital is exhausting enough.

Many older people lead active lives and need a reminder to slow down. The women that is. The men seem to have perfected that art already – or so I’m told.

Jane Bates is an ophthalmic nurse in Hampshire

# READERS’ PANEL

Is strike action over pay now the only option for nurses?

Nurses on picket lines will embarrass the government, but when nurses strike, patients suffer. We are the glue of the NHS, and without us many patients will not receive the treatment they need. Ahead of the general election, we need to take action that grabs headlines and shames politicians but does not affect patient care. I can’t bring myself to strike, but I will take industrial action to defend my profession if my union calls for it.

Drew Payne is a community staff nurse in north London

I have witnessed numerous calls for industrial action and seen the effects on my older and vulnerable patients, who fear for their care. I would never consider withdrawing my labour. The junior doctors gradually lost public sympathy over strike action, as patients felt the effects of cancelled surgeries and outpatient clinics. I would urge nurses to reflect carefully before risking the image of the profession by taking hasty action.

Linda Drake is a practice nurse in south London

Striking is not the only option, but it is becoming an increasingly plausible one. Six years of pay cuts in a profession known for its modest wages is unacceptable, but as we saw with the junior doctors, striking risks damaging the reputation of the profession. Action needs to be disruptive enough to have an effect but must not put patients’ lives and health at risk. How we achieve this, I don’t know.

Daniel Athey is an acute medical unit charge nurse in Sheffield

Although workers have the right to withhold their labour, I believe the nursing profession transcends this because of our moral, ethical and professional duty to safeguard vulnerable patients. The government is acutely aware of our obligations, so will continue to try its luck by failing to invest in the profession. My fear is nurses will leave rather than risk failing in their responsibilities by taking action.

Liz Charalambous is a staff nurse and PhD student in Nottingham

Readers’ panel members give their views in a personal capacity only