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The Gift

By H. Douglas Roberts, M.D., CSA President

In the not too distant past, it was quite commonplace for academically promising high school students to be counseled by parents, educators and others, that serious consideration should be given to pursuing one of several revered professions as their life's goal. The "Big Three" usually were Medicine, Law, and Theology. Careers in Teaching, Business, Engineering, and the Military were admired, usually considered a profession, and students were often encouraged to seek such areas of interest if appropriate; however, the aforementioned three professions were often felt virtually to anoint a special aura upon those successfully entering and completing the requirements of such a profession.

Why a special aura? Perhaps more than anything else, it was felt that those persons seeking such a profession did so for altruistic reasons. While it was not uncommon to find students failing to meet the academic challenges during the formal professional schooling, it was also no rare occurrence to hear that an academically capable student had been "drummed out" for ethical reasons. On occasion, these ethical reasons for dismissal included a consensus by those overseeing these schools (and hence, the keys to the profession) that the student's primary reason for attending such a professional school was not in keeping with the tenets of the particular profession, especially within the environs of Medicine and Theology.

As a result, when the young neophytes walked down the aisle to receive their piece of parchment announcing successful completion of the basic requirements to enter into a chosen profession, it was also acknowledged that they had also received from those who had gone before them the Gift—The Gift of the profession. In Medicine, this Gift should never be taken for granted. This Gift has many facets—the responsibility to meet, speak, touch, probe (verbally and physically), attempt to help and possibly heal fellow human beings seeking help—all the time remembering the patient's vulnerability as they enter into a confidential relationship with you—the Physician. Matter it not if you call yourself an Anesthesiologist—you are a Physician first and foremost.

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To Give Any Less Than Your Best Is To Sacrifice The Gift

I submit to you, as Physicians who practice Anesthesiology, some thoughts for consideration. As the avalanche of scientific and technical advancements parade into our practice, we increasingly find ourselves spending less time with our finger on the pulse of the patient and more time observing the various monitors (when we do place our hands on the patient, it is often with gloved hand). As the “Business” of Medicine thrusts itself into our Practice of Medicine, we find ourselves checking costs of drugs, who is paying for a particular patient’s care, can we “move” a little faster to save someone’s cost?, should we renew a particular contract?, will we lose certain referrals if we don’t sign a particular contract?, etc. ad nauseum. As the cost of education continues to climb, as the cost of an “average” automobile exceeds the cost of a decent tract home a few decades ago, as the cost of purchasing an “entry level” house in some areas becomes beyond the reach of a reasonably reimbursed physician, and as the threat of rising malpractice insurance creeps into a serious consideration—are we still concentrating on our patient? The patients who entrust us with their very well being, their lives—are we giving them our best? I think the answer is still in the “YES” column. However, the confidence in that “YES” could easily wane—some would say it has already begun to do so in some quarters. According to pollsters, the public still places a great deal of confidence in their physicians—when they can get to them and speak with them! In spite of sensational items presented by the news media, the public’s respect and confidence in the Medical Profession continues to remain reasonably high. It was of interest to hear President Bush’s comment in his 2004 State of the Union address in respect to medicine—“A government-run health system is the wrong prescription!” While I am not here to debate presidential politics—I think that President Bush’s comment has to be a “Truism”!

My biggest concern is that we have become overly focused on the “Business of Medicine” and overly enamored with the scientific and technical advances of our specialty, all of the forces contributing to a decreased “laying-on of our hands” on our patients (to say nothing of verbalizing with the patients) and an erosion of the doctor/patient connection. The advertising by some physicians today reminds me of the snake oil salesmen of yesteryear promising miraculous cures for any number of maladies. Any erosion between the physician and patient will not only cause a loss of respectability and esteem of the medical profession by our patients, **it will be the death knell of the profession.** I submit for comparison, the drastic fall in esteem and respect the public has had for the legal profession, one which once was highly revered. The concentration

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on financial awards rather than truth, fairness, and other ethical values has caused near irreversible harm to that profession.

In spite of the onerous government, insurance and financial climates in which we as Physicians practicing Anesthesiology find ourselves, my plea is to not sacrifice the Gift handed to us by our predecessors. A sacrifice of the trust placed upon us by our patients should never be forfeited for some short term personal gain—be it the hospital's, the physician's, or some third party's. Too much has been invested in time, sweat, tears, and lives to create and better the Gift—the very Gift which we should be preparing to hand over to the next generation of Physicians. This is not to say that we as Physicians should discontinue our attempts to receive an income sufficient to cover costs and provide for ourselves and families. To allow ourselves to be trampled upon is not in our best interest nor that of our patients; however, we must caution ourselves not to forsake the Gift. Also remember the concept of the “Power of One”—our patients are not only our first priority—they can also become a friend and proponent. What closer bond can there be than that between a physician who dangles another human into the world of Anesthesia for a short time and sends them on their way—alive, awake, oriented, and often relatively pain free?

I close with a statement made by a respected professor as he spoke to us first day/first year medical students, “If you have arrived at this point in your life, that is medical school, with dreams and hopes of making a big income—you should get out now! The work and time you will invest in becoming a good physician and remaining such a person will far exceed what it takes to make really big money in some other endeavor.”

CSA/CMA Legislative Day

The annual CSA/CMA Legislative Day is April 28, 2004, from 7:30 a.m. to 4:30 p.m. CSA members are urged to attend for all or part of the day. The CSA will reimburse 14-day advance coach airfare or mileage to members who are part of the CSA delegation (in other words, not representing a CMA Component Society).

This annual event is a good way to learn the most important issues in medicine in the legislature this year, and to visit your legislator or attend hearings. Please let the CSA office (800-345-3691) know if you are attending so we will know how many tables are needed.