

# The President's Page

## Physicians, Professors, and the Future

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

A little over a year ago, I stood before the CSA House of Delegates and spoke in an admonishing tenor that you (Anesthesiologists) should “Consider who you are!” As Physicians we are many things to many people... we are doctors of medicine or osteopathy, practitioners of the healing arts, teachers, mentors, ethicists, scientists, advocates for our patients, and, even spiritual healers! As Anesthesiologists, we are also specialists in a very exciting, fulfilling, albeit demanding and exacting segment of the medical profession. When someone asks me what does it take (educationally) to become a physician who specializes in Anesthesiology, my answer is first you need to complete 13 years of “basic education” (kindergarten through high school) and then “start over” by spending 12 or more years of college, medical school and residency! If you are fortunate to find yourself completing residency, approaching that “magical” age of 30, staring at both board exams and school debt as well as personal responsibilities to family, it becomes so easy to overlook one of the more important ingredients which enabled you to reach this zenith point in life. Without teachers and professors, none of the above would likely have ever happened! As we all know, it is one thing to read about a biochemical reaction or clinical procedure. It is a completely different task to physically complete a complex (often a seemingly impossible) procedure for the first time. The idea that we would have succeeded in the college laboratory or the laboratory of life without the presence of those dedicated sages as we pursued the pathway to becoming a physician—and later as neophyte Anesthesiologists (also known as residents)—is most definitely an invalid premise/conclusion!

The future of any professional subspecialty such as ours is dependent upon the teaching centers' ability to attract physicians with the desire to explore and gain the necessary knowledge and experience. To attract the brightest applicants, that training center needs a proven faculty of dedicated physicians. Often the desire to do research beckons the young doctor to stay and become a faculty member. Teaching sometimes is an after thought at first and then becomes intriguing as the chance to trigger thoughts in another physician's mind creates its own balm. Unfortunately, a financial tug-of-war ensues as the young professor looks beyond the limits of the training center and university setting. The enticement of higher income teams with the pressures of family obligations, and the often acquired debt from the days of school and training. The end result

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sees a good potential professor walk from the training center. When that happens, we as a profession lose. Society loses as well.

This past February, the CSA leadership met over dinner in Los Angeles with a number of the Academic Chairs from around California. The aim of the Academic Chairs Meeting was to discuss mutual problems, thoughts and needs. One significant area of discussion revolved around the need to help those fellows and senior residents with a distinct potential to become professors to remain within the world of academia. This concern, as well as others, will soon become an area of focus by our Legislative and Practice Affairs Division (LPAD). Hopefully, some creative thinking plus some energy by those within the leadership of CSA and ASA will help to create some answers to the issue of the “brain drain,” thus helping to ensure the future (and quality) of Anesthesiology.

What can/could you be doing in the meantime to help? How many of you live within a reasonable distance of a medical training center? I would venture to guess that many of you have taken advantage of various seminars and conferences provided by these institutions. You know where they are located. You might even have considered, or actually obtained, a clinical professor position and/or privileges at one of these meccas. Have you ever considered the radical thought of taking a week long “vacation” to spend with the residents—maybe even billing as the attending and then donating the income back to the training center as your gift for receiving a bigger gift in the past? Maybe something less time consuming, but perhaps just as important—encourage some promising young fellow or senior resident to give academic medicine a serious thought and try. Our profession and specialty is a very respectable and desirable one—it is also a very vulnerable one, one which can change quickly if the supply line (the training centers) fails to produce enough well trained, board qualified/certified Anesthesiologists. Consider the fact that most of you reading this issue of the *CSA Bulletin* will yourselves become patients in the future ... who will be there to handle your needs?

After reading this, consider thanking one of your teachers. As a CSA member receiving this *Bulletin*, you should probably thank a Professor of Anesthesiology!