

Supply and Demand

By now I'm sure everyone in our community surely knows that there is a physician manpower shortage. It has been reported on the front page of the *Arizona Republic*, the television stations have noted it, and "talk radio" has talked about it. We owe our colleagues, Drs. Rimsza, Grossman, and their coauthors a debt of gratitude for the hard work that went into this scholarly effort. While this report has done much to thrust the issue into the light of public opinion strangely silent is the population we serve.

I haven't heard of or seen reported throngs of citizens taking to the street to protest the lack of foresight of our politicians, the evil machinations of the trial bar, hospital industry or managed care barons who bear much of the responsibility for the woeful disparity between the number of care givers and those in need of care. Has the daily paper not received thousands of letters, have the politicians been silent while their email screams for action and, what of the hospital and insurance executives? Perhaps a moratorium on new hospital construction or a reallocation of insurance premium dollars to attract new providers and support the growth of existing medical practices is already in place and the solutions to the dangerous trend reported in this study are now the top corporate priority!

Of course we may get a new medical school and in 6 years as the first graduates go out to look for internships and residencies (which do not currently exist nor are any planned in this community) they'll fondly recall the nice weather or their favorite golf course, longing to return to Arizona for their professional careers. It is equally as likely that they'll succumb to the real needs of repaying student loans by earning incomes commensurate with their training and skill, in practices unfettered by managed care restraints, in a state where professional liability premiums do not escalate yearly unchecked by meaningful tort reform. How can we expect a new medical school graduate to seek out our community when our existing physician population continues to express dismay on these same pivotal issues? We have succeeded in scientifically isolating and analyzing the problem those of us on the "front line" of medical care in this community already intuitively know.

I doubt we will hear an organized, anguished call for action from the citizenry of our town. We will however, continue to hear complaints of long waits in the emergency room or waiting room, of restricted access to specialists, and of physician substitutes as the only source for care. Few will draw any conclusions as to how the course can be changed from what seems an inevitable, ever-deepening chasm between those in need and those who care. Once again we are viewed as the problem when we should be sought after for the solution.

The solution to the physician manpower dilemma is not going to be as readily definable as the excellent statistical analysis we now have regarding the magnitude and the detail on the subject presented in this report. As in any scientific medical study it is more precise, reliable and simplified to perform a review of medical records and analyze the trends and outcomes than it is to design prospective, blinded, randomized clinical trials. This is analogous to the situation in which we now find ourselves. Having confirmed the

diagnosis it's time for physicians to push the hospital corporations, insurance industry and, the plaintiffs bar for solutions that make medical practice in Arizona more desirable. There has never been a better reason to become a more cohesive, organized group. We're the ones in short supply in an atmosphere of spiraling demand! My high school economics teacher would be appalled that this most basic knowledge of enterprise in a free society still remains to be learned after more than a decade of education has passed between my final grade in his class and my chosen career.

See you next month,

Marc J. Rosen, M.D.

President