

## **These Are Perilous Times**

When I was a young man growing up in the 50's, my mother would say "these are perilous times." She was referring to the Korean War, development of the Cold War and the nuclear threat that existed. Today we too are seeing the Korean threat, nuclear proliferation again and not to mention a political war in Iraq.

Medicine in the 50's was a profession with dedicated physicians who were respected and often not well reimbursed for their effort. They never really got rich but lived a good life where their efforts were appreciated and malpractice was a rare event.

Today we are living through perilous times in medicine. We are experiencing increasing stresses on the fundamental practice of medicine. The exponential increase in medical knowledge and the requirement of continuing education at a time where pay-for-performance is stressing the physicians time is causing controversy. Tort reform has been difficult to obtain. Political upheaval created by the last election will push for Medicare changes. Increased cuts in reimbursement are forcing single practitioners to have difficulty in making a reasonable living without working 70 to 90 hours a week. Fatigue, both physically and mentally, is ever increasing and limits on time by law are creeping into our lives. The failure to want to address many of the costly but politically sensitive problems, such as futile care, has added even more stress. Requirements for compliance without reimbursement are another sensitive topic. The risk-benefit-ratio of many of these requirements and their consequences are remarkably stressful for the practice of medicine.

The loss of the physicians with experience at an increasingly younger age is a problem. Concerns about fatigue factors in training programs are limiting experience and learning to deal with fatigue. The number of applicants for medical school has dropped considerably over the years to a low of about 1.5 to 2 applicants per position. Interestingly, in the last year, the numbers have gone up to closer to 2 applicants per position. The graduates also tend to practice less. Many young physicians are expecting larger salary incentives to begin practice than some of the practices can offer. They also expect more free time but sometimes they are willing to take less salary for more time off. Often, two physicians are sharing a practice. HMO work is offering a controlled environment with less income but better hours at the cost of inability to control your own destiny. The traditional tendency for physicians to work for themselves is becoming a thing of the past.

All of these factor, and many others, have influenced many of the best qualified medical school applicants from the United States to go into other fields. Opportunities for foreign medical graduates are increasing. Eastern physicians are taking the place of American graduates that are unwilling to participate in the practice of medicine. The opportunity that medicine offers to be of service to others and to become a respected member of the community is being lost by the American graduates and the United States is lucky that many of our eastern colleagues see the opportunity to serve and are willing to take the risk of the practice of medicine.

Therefore these are “Perilous Times for Medicine.” How we, as practicing physicians, approach these problems will shape the future. The unfortunate problem is that organized medicine has had a tendency to be less vocal and we have lost credibility with our peers. Our ranks are diminishing due to our attempts to maintain our own life, have a family, work the 70 to 90 hours to survive and grow our practices. Time to get involved is left to the final few moments of the week and often the national medical organizations have not perceptually been supportive. Therefore, we are losing the perception that organized medicine is representing our interest.

You have asked me to represent you for the year of 2007. I appreciate the opportunity to serve as the President of your medical society. In my editorials, I hope to address topics of the physician community and give you ideas for approaching our local and national representatives to help stabilize the problems that the practicing physician faces. Some of my thoughts may not be as popular as I would like but they may be points of discussion that may stimulate conversation and development of ideas that may be important not just on a local level but nationally.

Thank you for the opportunity to represent you. I hope this year will bring our Medical Society together with more social interaction as well as for sharing of ideas.

**Jud Tillinghast, M.D.**  
**President**