To Practice Or Not To Practice ... That Is The Question

By Zoe Kiren Deol, MD, FACS

Back in the day (oh how I hate the fact that I am old enough to say that!), there was one question that never entered my mind as I made my way through medical school. That question was, “Do I want to practice medicine?” Today, it is a different story. Medscape recently listed their “Top 10 Articles For Medical Students in 2009”.

Among the unsurprising titles were articles such as #2 on the list: “USMLE Prep Quizzes”, and #4 on the list: “Residency Match: Avoid Getting Burned”. However, #6 on the list may surprise you: “Not Sure Medicine Is Right For You? Get Career Tips Here”

When and why did this become a point of interest on the map of the minds of medical students? My fellow medical school classmates had various stories about what lead them to medical school. Some were stories of hardship and loss that gave them a sense of purpose in life to save those that may not have otherwise been saved. Some were stories of the “yellow brick road” variety that focused on the fabled pot of gold at the end of the rainbow. However, the vast majority were your basic, run of the mill, “following in my parent’s footsteps” stories. Although these stories had very different chapters, their conclusions were all the same: You became a doctor and practiced medicine. The End.

Why then are so many medical students today questioning their career choice before they even obtain their degree? To answer that question, you have take a look at how medicine has change over the past …… no, I am not going to tell you how many years it has been since I was in medical school! I *can* tell you that, even when I was in medical school, my father, a general surgeon, was already complaining that medicine was not what it used to be.

While he tried to pressure my older brother and sister into applying to medical

school, by the time I was old enough to be thinking about going, he had already stopped thinking about pushing. He recently admitted to me that he was torn by my decision to go to medical school, and even more torn by my decision to become a surgeon. He could see the writing on the wall and he did not like what it said. Already gone were the days when “general” surgery meant exactly that.

My father used to repair aortic aneurysms, do pulmonary lobectomies, thyroidectomies, and even help deliver babies. By the time I started medical school, “general” surgery had become “specific” surgery. It was becoming so sub-specialized that you needed to do a fellowship to perform most of the procedures my father used to do “all in a day’s work”. As a result, he saw his repertoire of procedures slowly whittled away with the creation of each new surgical sub-specialty.

Conversely, those who sub-specialized, restricted their future to a handful of procedures, and had to forsake the other 80% of what they learned during their residency training.

In my father’s career, he saw the evolution and corruption of health insurance companies, and the resulting dwindling adequacy of physician compensation. Whereas he was able to pay off his loans and support a family of six in what most would consider a “middle class” lifestyle, he saw his friend’s children struggling with debt for most of their careers.

My father’s financial success came despite his habit of accepting donations of eggs or fresh baked goods from patients as form of payment. It came despite his name being listed on the wall of the local catholic convent in honor of his constant pro bono treatment of the nuns, even though my father was a Sikh.

He worked long, hard hours, and sacrificed a good portion of his personal life for his career; but, as a result, he had a gratifying career, he was able to support his family, and he was able to put four children through college and graduate school. In his mind, that was a fair trade. Today, however, those same sacrifices are repaid with insurance denials, lawsuits, and the unfortunate evolution of an adversarial doctor-patient relationship.

So, is it any wonder that the medical students who descend from a long lineage of doctors are already questioning their choice of career before they start? To end this thought on a positive note, I will say this: where one door closes, another door always opens. Instead of walking away from this with a heavy heart at the thought of this being the end of the world of medicine as we know it, consider instead the possible answer to Medscape’s sixth most popular topic for medical students.

What are the possibilities for doctors who decide against a clinical career? How wonderful and exciting to have the skills that would allow you to live several different lives during your time on earth, rather than staying in the one niche you carved out before you even knew what you were getting yourself into. When I was in medical school, I never would have thought I would be writing a blog for a surgical products magazine.

For those of you considering a career change, here are some resources for organizations and non-clinical jobs for physicians:

PRN (Physicians Renaissance Network) www.prnresource.com [1] Founder: Mike McLaughlin
Non-Clinical Healthcare Professionals www.nonclinicaljobs.com [2] Founder: Joseph Kim
BioSpace www.biospace.com/jobs/homepage [3]

What's your take? E-mail zoedeol@msn.com [4]

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