

Dinosaurs

Were the last dinosaurs aware of their impending extinction? Did the *T. rexes* sit around in bars nursing a beer and reminiscing about what once was? Of course not, their arms were too short.

I'm not upper-limb challenged, so after a few drinks I'm able to reflect. I am a dinosaur. I never saw it coming.

During my training I remember the limiting of billing numbers that made my classmates and me wonder which small, northern BC community we would be forced to practise in. I remember purchase prices of family practices being in the six figures. I recall nervously applying for hospital privileges, as failure to acquire these would guarantee the demise of my fledging general practice. There were two types of doctors—specialists and family doctors. You were either in one club or the other.

Then something changed. Walk-in clinics arrived. The hospital got cold, ice started to form in the mailroom, the vegetation became scarce and bitter, you could even start to see the family doctors' ribs. Suddenly, there were three clubs and this newest club wasn't interested in hospital privileges. These doctors didn't need to provide continuity of care, as after all they were providing a valuable service by keeping simple problems out of our busy emergency departments, thereby easing

overcrowding. These crusaders would work in their clinics for a designated number of hours then leave. No call, no pesky hospital rounds or committee meetings. This group thrived; they multiplied and spread throughout the land, foraging and snapping up the tastiest and most accessible foliage. Some of those left behind began to weaken and tire. Hey, if they can do that why can't I? Family doctors began to give up hospital work. Those who remained were forced to take on more work. Increasing amounts of time and energy were required to care for hospital patients. This expansion of duties only encouraged more to leave, again increasing the load on those left behind.


Eventually the system imploded and a new club was born—the hospitalists. This group only took care of hospital patients and rotated their duties through designated shifts. Again, no call, no committees (Why no committees?), and no follow-up once the patients are discharged. At our hospital they even get free parking (the family doctors and specialists don't).

So now I roam the halls, a dying breed, one of the last of my kind, a hollow shell, a carnivore without claws, an empty vessel, a ball without a chain (I have no idea what that means but I was getting tired of the dinosaur analogies). They say change is in-

evitable and the medical milieu is no exception. There are now physicians practising in my community whom I have never met, something unheard of years ago. Even the type of medicine is changing. The walk-in clinic next to my office offers Botox, fillers, permanent make-up, and other facial rejuvenation procedures. How did cosmetic techniques become part of everyday medicine? It's not that I'm criticizing our colleagues who choose to become hospitalists and clinic doctors, as many of them practise with dedication and skill. I'm not even sure which path I would take as a new graduate. It's just that things changed and I'm not sure this change is for the better. Will the numbers of full-service family physicians continue to dwindle? In my community I can count on one hand those that have followed me into family practice, and I've been in practice for 15 years. Do I really care or am I content to just put in my time doing my best to tend to the patients under my wing? Is this time-honored position worth fighting for? Does the public mourn this trend or are they happy to go to a walk-in clinic and if they end up in hospital are they satisfied with being followed by a hospitalist? If we are to fight to save Old Doc Smith, where should we direct our energy? Lately, the ice appears to be retreating somewhat thanks to a paradigm shift initiated by the General Practice Services Committee through the Practice Support Program. Will these initiatives be enough to attract new graduates to full-service family practice and maintain those doctors we already have?

Increasingly I ruminate on these issues and many more. I'm not sure what a family practice will look like in 5, 10, or 20 years, but in the meantime I'm heading next door. Just because I'm a dinosaur doesn't mean I have to look like one!

—DRR

beyond the blues
 depression anxiety
 education and screening day 

Depression and anxiety problems can be hard for patients to discuss with their doctor...

This October 4th, we can help break the ice.

You may see patients as a result of our 13th annual screening events across BC. Learn more at www.heretohelp.bc.ca. Presented by the BC Partners for Mental Health & Addictions Information. Endorsers include the BC Psychiatric Association and BC College of Family Physicians. Funded by BC Mental Health and Addiction Services, an agency of the Provincial Health Services Authority.