

## BCMJ 60th anniversary: Diamonds are Forever

I have to admit, I often get mistaken for Daniel Craig, particularly at the beach.<sup>1</sup> Sometimes I even fake an English accent and answer the phone, “Bond, James Bond.” All of this fits perfectly with the *BCMJ*'s<sup>2</sup> upcoming Diamonds are Forever celebration. We are having a party in honor of our 60th year of publishing and you are all invited. Since diamonds represent this sixth-decade milestone we stole the title from a movie featuring the secret intelligence agency's (MI6) favorite double-0 agent.

The soirée will occur on Thursday, 9 August at Doctors of BC's office building. Appetizers and refreshments will be served and 007-themed dress is encouraged but not required. Doctors of BC members may RSVP at <http://evite.me/jANckwTmc2>.

Sixty years is a milestone we can all be proud of.<sup>3</sup> The *BCMJ* remains a valuable publication written by the physicians of BC for the physicians of BC. The journal's focus on Brit-

ish Columbian research and opinions is unique in the world of medical literature and makes it a standalone resource for our province's physicians. This upcoming get-together is an opportunity to network and interact with

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the journal's Editorial Board and staff. Past and current contributors will also be well represented. You'll also get a glimpse into the journal's seamless internal operations. Please use your secret agent skills to watch for spies

from the *New England Journal of Medicine* and the *Lancet* as they are forever trying to infiltrate and copy our inner workings.

I hope you make the effort to come as I will even give you a ride in my Aston Martin, provided free of charge by Doctors of BC,<sup>4</sup> but be careful about which buttons you push. Dr Robert Vroom recently hit the ejector switch and ended up on the Sunshine Coast. Please search me out and say hello. I will be the dashing tuxedoed man at the bar ordering my martini shaken, not stirred.

—DRR

### Notes

1. This has never happened.
2. I took some flack after my editorial about acronyms by using this one, but *BCMJ* is recognized worldwide and is also on the cover.
3. As an aside, the Bond movie franchise is only 50 years old.
4. Also completely made up.

*Let's Celebrate*

BCMJ 60TH ANNIVERSARY: DIAMONDS ARE FOREVER

When: Thursday, August 9 at 6:30 PM

Host: BCMJ Editorial Board  
604 638-2815

Where: 1665 West Broadway  
Vancouver, BC

Please join us as we celebrate the BCMJ entering its 60th year of publishing.  
Members + guest registration at <http://evite.me/jANckwTmc2>

## I am a GP, not a GPS

In a recent proclamation of Family Doctor Day, the BC government states that family physicians lead the delivery of accessible health care, strengthen the capacity and overall quality of the health care system, and improve the overall health of the population ([http://bccfp.bc.ca/wp-content/uploads/2018/04/Family-Doctor-Day-May-19-2019\\_Optimized.pdf](http://bccfp.bc.ca/wp-content/uploads/2018/04/Family-Doctor-Day-May-19-2019_Optimized.pdf)).

In another breath, the BC government's lawyers (in the ongoing constitutional challenge launched by the Cambie Surgery Centre, et al., against the BC Ministry of Health, et al.) have stated that "If patients are waiting too long for treatment and suffering harm as a result, it's mostly because doctors aren't making the right decisions." According to court transcripts, the lawyers representing the BC government went on to say that "Patients shouldn't experience unnecessary or unreasonable pain or suffering if treating physicians exercise their professional judgement appropriately. Doctors are supposed to assess, treat, and prioritize patients according to their medical conditions; if patients suffered, it was because of decisions made by, and actions taken or not taken by, their treating physicians."

When I signed up to be a family doctor, I thought that I would be a diagnostician, healer, and confidante. I did not expect to be a navigation system for my patients. I am a GP, not a GPS. I did not expect that one of our office staff would be tasked solely with dealing with our patients' referrals for appointments with specialists and tests such as MRI scans. This staff member spends hours on the phone and fax every day, trying to get patients the soonest possible appointments with specialists or diagnostic facilities. Not infrequently, I or one of my colleagues has to make phone calls to a specialist to plead for

an earlier appointment. For many of these appointments, patients are waiting months to years.

Theoretically, I could refer the patient to the specialist with the shortest wait list, and I often do, but sometimes that specialist is someone I would not feel comfortable sending a family member to. I prefer to treat my patients as I would want to be treated. Thankfully, the majority of specialists provide excellent care, but as a result, they have long wait lists.

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I recall two patients, in particular, from our office. One had spinal cord compression and early cauda equina syndrome. Despite my colleague spending hours on the phone trying to get the necessary MRI with contrast, and trying to get the patient seen urgently by the appropriate specialist, he ended up having to send the patient to an already overburdened emergency department to access the care he needed. The other patient needed urgent investigations for a pancreatic mass. It took multiple phone calls, eventually getting hold of the specialists on their personal cellphones, to arrange the urgent diagnostic tests and surgery that patient needed. Otherwise, these two patients and countless others like them would still be waiting for treatment, or worse, they would be permanently harmed or even dead.

We are not always able to pull the

necessary strings to get patients in for the care they need in a timely fashion. Most of the time, patients wait patiently to be seen by a specialist or to undergo a diagnostic test. Most of the time, they wait longer than is reasonable. If the government can't afford to provide comprehensive health care in a timely fashion, then they shouldn't prevent patients from accessing it by their own means. I often joke with patients who injure themselves while at home or at play that they would get faster treatment if the injury had happened at work. But it's not a joke. Workers, RCMP members, prisoners, federal employees, and visitors to Canada can all access expedited care through private insurance. As can the citizens of Quebec, thanks to the Choulli decision of the Supreme Court of Canada. As can your pet.

It is time to acknowledge that we already have a multitiered health care system. We have to pay for prescriptions, for spectacles, for physiotherapy, etc. Private insurance is available for those services. Why not make private insurance available for other medical services? It's also time to rein in health care spending, by spending less on the *administration* of health care. Unfortunately though, the people charged with deciding how health care dollars are spent are not the people who actually provide the health care. Those of us on the front lines (doctors, nurses, and others) are the ones trying to do the best we can with limited resources. Don't blame us for the rationing of health care.

—DBC

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### Competing interests

Dr Chapman is part owner of a private diagnostic facility.