

Waiting in pain

Patients and doctors are worried about access to surgery in British Columbia.

Waiting is not an idle state. It is not merely the passage of time until one's name rises to the top of a list. Foundering benchmarks don't capture the human experience of surgical purgatory. Waiting is painful. It can be physically painful, like for the patient in need of a joint replacement who can barely walk anymore. Waiting can also be emotionally painful, like for the patient with an ovarian mass whose prognosis hangs in the balance of her pathology report.

In this issue of the *BCMJ*, we are publishing two articles on the state of surgery in our province. In the article on the availability of surgical services in rural British Columbia, Dr Brooke McDonald and colleagues present data that they meticulously collected about procedure volumes in 45 rural communities. Of those communities, 23 did not have a surgical provider and five had family physicians with enhanced surgical and/or obstetric skills as their sole surgical providers.

The article caused me to reflect on how fragile our health care system is in many places, when critical procedures like cesarean sections, appendectomy, abscess management, and colonoscopy depend on one physician for an entire community of people. At a time when many of us in tertiary care settings feel overburdened and burned out, I also wonder about the physical and emotional well-being of these rural colleagues who likely have even less support at their disposal. I imagine that carrying the load of an entire community could feel simultaneously like a great privilege and a great pressure. Please write to the *BCMJ* and tell me about your experience.

For the other article of this quasi-theme issue, Dr Hwang and colleagues surveyed general surgeons on their staffing needs

and wait times. The demand for surgery has increased substantially over the last 10 years, but the number of general surgeons remains in deficit. Having this local data is important because, as they say, what gets measured gets managed. (Or at least we hope it will.)

Canadians' top priority for health care funding was to reduce surgical wait times.

We know that surgeons are just one part of the huge team required to successfully perform surgery. Nurses, porters, sterile techs, and anesthesiologists are just a few examples of the skilled people essential to a functional operating room. Any one of these indispensable roles can be impacted by training, understaffing, recruitment challenges, etc., and that's without mentioning the infrastructure itself. This is a complex problem.

In December 2023, Leger, a polling company, published a national survey¹ in which 63% of respondents were living in British Columbia. The results indicated that Canadians' top priority for health care funding (36%) was to reduce surgical wait times. The online survey was intended to find out about Canadians' preferences for Pharmacare, but in the end only 18% said they wanted money to go toward creating a new universal single-payer drug coverage plan. Global News reported on the politics currently at play on the topic of health care spending, noting that current proposals do not seem aligned with the stated needs of our population.²

In his recent interview with the *BCMJ* [2024;66:10-13], our new Doctors of BC

president, colorectal surgeon Dr Ahmer A. Karimuddin, mentioned that part of the reason he wanted the role was to impact positive change in wait times. Although we are rich in resources in Canada, our system is failing people. Dr Karimuddin comes into the role with energy and enthusiasm for a collaborative approach, using resources like the Specialist Services Committee to leverage change for patients. He recognizes that a lot of people are "at their wits' end . . . and they [are] going to continue to feel stressed and distressed for their patients and not be able to do much about it."

Surgery, whether it's elective or emergent, is essential to good health care. Physicians and patients have identified that access to surgery is a problem. What do you think is one thing that would help? ■

—Caitlin Dunne, MD, FRCSC

References

1. Leger. Report: Pharmacare: Survey of Canadians. 2023. Accessed 19 January 2024. https://leger360.com/wp-content/uploads/2023/12/Leger-X-CP_Pharmacare.pdf.
2. Osman L. Surgery wait times bigger health priority for Canadians than Pharmacare: Poll. Global News. Updated 20 December 2023. Accessed 19 January 2024. <https://globalnews.ca/news/10181516/canada-health-priorities-leger-poll>.

Grateful

Gratitude can be your gateway to a joyful life.

After a few years in practice, I witnessed some of my older colleagues give up their hospital privileges. I recall listening to their stories at the time. They did not express any joy in their work. They were disillusioned and no longer felt valued for the work they were doing in the hospital. I remember thinking that I could learn from their experiences to try to avoid feeling what I now realize was probably them feeling burned out. I don't think I was familiar with the concept of burnout at that time. Although the term was coined in the 1970s, it was not part of my lexicon in the 1990s.

I tried to avoid overworking by pacing myself. I took a day off during the week, and I still do. Starting out in practice is nerve-racking. The worries are endless. The natural inclination is to build up a patient panel as fast as possible. I was fortunate to have some amazing mentors in my medical career. Dr Jerry Danielson, for whom I did a locum in Shellbrook, Saskatchewan, taught me not to accept every new patient who walked through my door into my practice. That saved me a lot of headaches and is a pearl I now pass on to younger colleagues. Jerry taught me to pace myself.

I also try to keep a positive attitude, which I learned from my late dad, who is my most treasured mentor. My religion has taught me gratitude, which can reduce toxic emotions such as resentment, frustration, and regret and makes depression less likely.¹ One study of Vietnam War veterans found that those with higher levels of gratitude suffered lower incidences of posttraumatic stress disorder.²

When dealing with the illness and death of my patients, I naturally feel sad. What pulls me up from the sadness is feeling grateful that it is not I or someone I love

who is going through that. I have had many days when I have gone home after work and hugged my children out of love and gratitude. After reading Dr Caitlin Dunne's editorial in the October 2023 issue of the *BCMJ*, it got me thinking about the type of father I was to my children when they

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were younger. It made me question whether I had been present enough in their childhood. I was relieved to hear them express gratitude to me recently for being there when it mattered to them.

Dr Mark Sherman, a family physician in Victoria, is a mindfulness coach who runs workshops for physicians on mindfulness in medicine, burnout, and resilience. I was privileged to attend one of his workshops and am on his mailing list. In his January 2024 newsletter, he states: "Gratitude is the entry point to living a joyful life. While it

can be easy to take for granted the blessings that abound near and far from the immediacy of our lives, when we slow down we can better *see* the grace that has been here all along. Amidst the challenges and tribulations there is, as well, *so much* beauty. Can you see it? Perhaps for you it is the health or vitality of your body, or the creative capacity of the mind. It might be the many blessings of relationship, or the resonant beauty of Nature. Whenever we look with the discernment of presence, we more easily slip into this place of gratitude."³

I am grateful for my health and for the people I love and those who love me. I am grateful for my friends and colleagues. I am grateful for the work that I do—for the ability to help patients in their time of need, especially the grateful ones. ■

—David B. Chapman, MBChB

References

1. The Rabbi Sacks Legacy. The power of gratitude. Accessed 17 January 2024. <https://rabbisacks.org/covenant-conversation/eikev/the-power-of-gratitude>.
2. Kashdan TB, Uswatte G, Julian T. Gratitude and hedonic and eudaimonic well-being in Vietnam War veterans. *Behav Res Ther* 2006;44:177-199.
3. Sherman M. Sacred responsibility. Living this moment blog. 8 January 2024. Accessed 17 January 2024. <https://livingthismoment.ca/blog>.



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