

Letters to the editor

We welcome original letters of less than 500 words; we may edit them for clarity and length. Email letters to journal@doctorsofbc.ca and include your city or town of residence, telephone number, and email address. Please disclose any competing interests.

Re: Beyond Kelowna

The recent editorial by Dr Kristopher Kang [*BCMJ* 2025;67:234] highlighting the shortage of pediatricians—particularly in rural BC—is an example of a larger challenge facing all of medicine: the death of the generalist. From general obstetrics/gynecology (which is experiencing unprecedented shortages leading to unit closures) to family medicine, physicians who choose a wide scope of practice are rewarded with punishing call schedules, poor remuneration, and diminished respect from many patients and some colleagues.

Daily, patients ask for unnecessary referrals to consultant specialists because they do not trust that their family physician has the expertise to diagnose or treat their acne or migraines or heavy periods or menopausal symptoms or whatever other malady family medicine cares for. Not only does this lead to the forever-growing referral pile that keeps our colleagues up at night—worried about what serious, time-sensitive ailment is awaiting their assessment—but it also leads to significant emotional burnout from generalists. The idea that over 2 decades of longitudinal family practice, including hospital care, maternity care, and rural experience, is meaningless to many of my patients because I'm not a "specialist" is eroding my love of family medicine. I imagine many general pediatricians experience that same pressure from worried parents who would prefer a referral to a specialist because they don't trust that a generalist could know enough about everything. Add to that the breadth of knowledge that a rural pediatrician requires, and anyone can understand why rural pediatricians are few and far between.

In a field where no human brain can keep up with the volume of new information, we as a profession need to maintain respect and support for each other and recognize that the superpower of generalists is needed now more than ever before. This means acknowledging and countering the hidden curriculum within medical education that continues to glorify specialization and minimize the importance of generalism.

—Tahmeena Ali, MD, CCFP, FCFP
Surrey

Re: Fewer patients per family physician in BC is the result of intolerable working conditions

I read with interest my colleague Dr Gerald Tevaarwerk's article on the ongoing pressures facing family physicians [*BCMJ* 2025;67:273-274]. I wanted to reply to his comment regarding consulting specialists, "for whom 'service' means managing one disorder." This does not reflect the scope of many specialist physicians or the pressures facing specialists who care for patients without primary care.

As a general internist, it is expected not only that I and my colleagues manage more than one issue, but also that we weigh in on almost every medical issue. I know that other medical specialists also feel pressured to follow patients for longer than we would if they had a primary care provider and to practise outside our scope for patients who do not have other access to care. This was well described by Drs Mason, Atwood, and Hodgins [*BCMJ* 2024;66:210-214].

I wonder if this may account for some of the increase in specialist visits Dr Tevaarwerk mentions; if so, that is another ripple of our system's failure rather than a sign of success for specialists. The ongoing crisis in our system is affecting family physicians and specialists in different ways, but specialists are certainly not spared from the growing challenges in physician working conditions in BC. I welcome any efforts to increase support for family physicians, as I see the lack of primary care showing up in my clinic, in the ED, and on the wards.

—Ben Schwartzentruber, MD
Victoria

An invitation to explore a Probus club near you

Dear friends and colleagues, those of you who are planning to retire or have recently retired may consider joining one of the Probus ("professional and business") clubs in the province. Typically, Probus clubs have regular monthly meetings to which guest speakers are invited to present on fascinating topics of interest to members. Additionally, there are a wide range of social activities. There are many members from the medical profession as well as other professions, academia, and business. Most clubs have individual websites where you can find details about their programs and activities. Many clubs also have policies allowing for guests who are interested in joining to be invited as potential future members. I have been a member of the Probus Club of Vancouver for 19 years, and I have found it to be an enjoyable, enriching experience.

—Hugh Chaun, MA, BM BCh
Vancouver