

Alberta Doctors' Digest

Will we have better luck with Hominid 3.0?

In this column, I want to consider some of the problems we face, medically and otherwise, if only to say I tried. Let me establish my bona fides.

I was a surgeon – it's strange to hear it in the past tense – but admit it was a good fit for me, in the manner that most manual workers and skilled technicians take comfort and satisfaction in working with their hands. The profession is further defined by two “Cs” that apply. One stands for “call” or “being on call” and roughly describes the amount of work that will come through the door. The other “C” stands for “complication”, or “complications,” a freighted word for sure, that refers to the mountain or mole hill of things that can go awry.

For surgeons of diverse interests or abilities, life pretty much exists between these two terms. Given a reasonable workload and results, a surgeon's life can be reasonable enough. Given bad numbers – too much work, unexpected troubles, infections and so on – and the world can become a dark, grim place.

The challenge of supply and demand

This is standard fare. Having trained in these parts more than fifty years ago, I can admit that medical practice has always been fraught with supply and demand issues that seem to get worse with time. Tumultuous change has been a constant.

During the 1960s, for instance, there was loud and emotional discussion across the province and the country regarding payment for physician services, medical insurance and the advisability of extra billing for certain care. Indeed, there is still considerable discussion regarding medical payments in Canada if only because of the stark contrast with the US, where medical bills remain a common cause of personal bankruptcy.

In Canada, medical care remains largely publicly funded. But as waiting lists have grown here too, for a variety of interventions, citizens with means have increasingly opted to pay for such care with their own funds, both in and beyond Canadian borders, and have been willing to travel as necessary to receive such care.

There you have it: two different systems, both beset by problems. What has changed, seemingly everywhere, has to do with the sheer volume of difficulties citizens face at this moment in time, and perhaps most alarmingly, our willingness and readiness to meet new challenges. We've become comfortable pigeon-holing our concerns regarding medical issues, like access to care, but would likely agree we face pervasive concerns about myriad aspects of our existence.

Perhaps the halcyon days will reappear

Recall for a moment the inaugural address of American president John F. Kennedy in 1961: “Ask not what your country can do for you. Ask rather what you can do for your country.”

Sixty odd years later, the words remain inspiring, even thrilling, but they also sound dissonant and even impossible. Political instability, bitter disagreements the world over, economic inequality, hucksterism, climate change and the tribalism that we have come to expect post-COVID now seem insurmountable. Let us admit that half of us have too little to eat but that another half of us have too much; that our economic systems have become winner-take-all extravaganzas at the same time we're drowning in debt; that we generally have neither the inclination nor the resources to look after the billions of souls on the planet.

Perhaps the halcyon days will reappear. Perhaps we'll see Camelot again. Perhaps we won't. It feels like we're stuck.

I'd like to wield my metaphorical scalpel to excise the bits that aren't working. Too much of our lives is built on our preoccupation with social media, titillating tales of skulduggery afoot, bizarre remedies for ailments that may or may not exist and sinister theories of conspiracies that will undo us all.

What if Homo Sapiens' version of things comes apart?

But there is one possibility. Prehistorians tell us that Neanderthals and other early hominids were eventually replaced by Homo Sapiens. This may be good news down the line for us too.

I can't remember what Neanderthals did wrong. Were they too rough? Bad planners? Home bodies or what?

Well, in similar fashion, if the Homo Sapiens' version of things comes apart, we may have better luck with another hominid. Let's call them Hominid 3.0 and hope for the best. Presumably we'll end up with a relative of sorts, one more motivated and more clear-eyed than any we've seen yet.

I'm mindful of the fact that this old surgeon (excuse me, ex-surgeon!) may have wandered too far afield. Hope is not, on its own, a good plan, but neither is waiting for good things to happen.

I've registered my concern at our sorry state of affairs. Said ex-surgeon was supposed to be cleaning out patient files and records, doing something useful, not mulling over world misery.

Let me apologize for my woolly thinking and my effrontery in chewing on the challenges of living well in these times.

I'm reminded of the old saw: What's the difference between God and a surgeon?

You've heard this before. Answer: God knows he's not a surgeon.

That may indeed be true. But he's got a lot to think about.

Editor's note

The views, perspectives and opinions in this article are solely the author's and do not necessarily represent those of the AMA.

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