of the Mahoning County Medical Society

Fourth Quarter 2009

## "Suck It Up, America: The Tough Choices Needed for Real Health-Care Reform."

By Dr. Thomas A. Doyle

Emergency departments are distilleries that boil complex blends of trauma, stress and emotion down to the essence of immediacy: What needs to be done, right now, to fix the problem. Working the past 20 years in such environments has shown me with great clarity what is wrong (and right) with our nation's medical system.

It's obvious to me that despite all the furor and rancor, what is being debated in Washington currently is not health-care reform. It's only health-care insurance reform. It addresses the undeniably important issues of who is going to pay and how, but completely misses the point of why.

Health care costs too much in our country because we deliver too much health care. We deliver too much because we demand too much. And we demand it for all the wrong reasons. We're turning into a nation of anxious wimps.

I still love my job; very few things are as emotionally rewarding as relieving true pain and suffering, sharing compassionate care and actually saving lives. Illness and injury will always require the best efforts our medical system can provide. But emergency departments nationwide are being overwhelmed by the non-emergent, and doctors in general are asked to treat what doesn't need treatment.

In a single night I had patients come in to our emergency department, most brought by ambulance, for the following complaints: I smoked marijuana and got dizzy; I got stung by a bee and it hurts; I got drunk and have a hangover; I sat out in the sun and got sunburn; I ate Mexican food and threw up; I picked my nose and it bled, but now it stopped; I just had sex and want to know if I'm pregnant.

Since all my colleagues and I have worked our shifts while suffering from worse symptoms than these (well, not the marijuana, I hope), we have understandably lost some of our natural empathy for such patients. When working with a cold, flu or headache, I often feel I am like one of those cute little animal signs in amusement parks that say "you must be taller than me to ride this ride" only mine should read "you must be sicker than me to come to our emergency department." You'd be surprised how many patients wouldn't qualify.

At a time when we have an unprecedented obsession with health (Dr. Oz, "The Doctors," Oprah and a host of daytime talk shows make the smallest issues seem like apocalyptic pandemics) we

have substandard national wellness. This is largely because the media focuses on the exotic and the sensational and ignores the mundane.

Our society has warped our perception of true risk. We are taught to fear vaccinations, mold, shark attacks, airplanes and breast implants when we really should worry about smoking, drug abuse, obesity, cars and basic hygiene. If you go by pharmaceutical advertisement budgets, our most critical health needs are to have sex and fall asleep.

Somehow we have developed an expectation that our health should always be perfect, and if it isn't, there should be a pill to fix it. With every ache and sniffle we run to the doctor or purchase useless quackery such as the dietary supplement Airborne or homeopathic cures (to the tune of tens of billions of dollars a year). We demand unnecessary diagnostic testing, narcotics for bruises and sprains, antibiotics for our viruses (which do absolutely no good). And due to time constraints on physicians, fear of lawsuits and the pressure to keep patients satisfied, we usually get them.

Yet the great secret of medicine is that almost everything we see will get better (or worse) no matter how we treat it. Usually better.

The human body is exquisitely talented at healing. If bodies didn't heal by themselves, we'd be up the creek. Even in an intensive care unit, with our most advanced techniques applied, all we're really doing is optimizing the conditions under which natural healing can occur. We give oxygen and fluids in the right proportions, raise or lower the blood pressure as needed and allow the natural healing mechanisms time to do their work. It's as if you could put your car in the service garage, make sure you give it plenty of gas, oil and brake fluid and that transmission should fix itself in no time.

The bottom line is that most conditions are self-limited. This doesn't mesh well with our immediate-gratification, instant-action society. But usually that bronchitis or back ache or poison ivy or stomach flu just needs time to get better. Take two aspirin and call me in the morning wasn't your doctor being lazy in the middle of the night; it was sound medical practice. As a wise pediatrician colleague of mine once told me, "Our best medicines are Tincture of Time and Elixir of Neglect." Taking drugs for things that go away on their own is rarely helpful and often harmful.

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#### Bulletin

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The Bulletin is published bimonthly by the Mahoning County Medical Society, 565 E. Main Street, Suite 220, Canfield, Ohio 44406.

Phone (330) 533-4880 Fax (330) 533-4940.

www.mahoningmed.org

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#### **CALENDAR**

February 25, 2010 MCMS Alliance Fashion Show,

Avion on the Water, Canfield

March 5, 2010 Ringling Brothers Barnum & Bailey Circus

Covelli Centre

April 9 ~11, 2010 OSMA Annual Meeting, Columbus

April 23, 2010 International Wine Taste,
Michael Alberini's Restaurant

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#### FROM THE DESK OF THE EDITOR

Thomas S. Boniface, MD

A Boilpuns



#### Change Happens

It's hard not to be cynical in days like these. While some recent events such as the massive economic collapse were difficult to predict, the progress of the attempted "reform" of healthcare by our lopsided federal government has been more predictable. The only positive I see so far is that the self serving avarice of virtually every member of the legislature has been exposed for all to see. It will be very interesting to see where it goes from here. Will the electorate express itself and clean the House (and Senate), or will its collective anger succumb to the

ennui of the relative well being left over after decades of affluence? How will the legions of those of us soon to be even more beholden to the federal behemoth respond to the new shackles that will doubtless be applied?

I read an editorial recently that likened our current situation to that of the Colonists under British rule. It analyzed present events and found correlates with those during the time of the Revolution. The conclusion however was curious – we should work with our organizations, write letters, and phone our representatives, even the President himself. If my understanding of history serves, when pressed beyond their limits of tolerance, the Colonists didn't lobby their Lords, call the King, or petition the Parliament – they threw the tea into the harbor. They put everything they had at risk for the sake of their freedom, and for the sake of their faith in who they were and why they were here.

Who are we, and why are we here? Too much of our response to reform has been ultimately about preservation of the status quo, which while understandable is not tenable. The system in which we work has been perverted, taken over by the insurers in search of profit, and the government in search of power. Along the way, physicians have been led away from their focus on the patient, distracted by the pressures of liability and regulation, and sometimes allured by the desire for revenue.

I don't know what our metaphorical tea may be, or into which harbor we may need to throw it, but we had better start thinking it over. The government will do what it will, the insurers will still profit, and the patients ultimately will stay ignorant of what they need and how to get it. It will remain our obligation as physicians to represent the patients' interests, ahead of the GDP, ahead of the government, and even ahead of our own needs. If we cannot do this, there will be nothing left for which to fight. If we can, however, we will preserve the real health of our patients, and the integrity of our profession.

It has been an honor to serve the Society as Editor, and I have always appreciated the kind words many of you have extended me on my work. While I do intend to continue writing, my efforts will be shifting, and the unfortunate pressures of time will not allow me to remain at this post beyond this issue. I look forward to many more years of dedication to the practice and teaching of Medicine, and, as I hope for all of us, do so with integrity.



#### From the President by Dean R. Ball, DO

I hope everyone had a wonderful New Year and great first decade of the twenty first century. I would first like to congratulate our Distinguished Physician of the Year. Being fairly new to the area I did not have the pleasure of working with Dr. Crans when he was an active surgeon. Never scrubbed in with him or, as a radiologist, I never worked with him on any cases. I did have the opportunity to work with him on Mahoning Medical Society Council. I was invited onto the Council without knowing

most of the other council members very well. Dr. Crans was always the council member to make you feel very welcome. But his personality always seems to go beyond that. Often times I would leave the meetings feeling like I had known him for decades. That's what kind of person he is and I can only think that the patients that were lucky enough to have him as their physician also felt that.

Any physicians out there ever wanted to or thought about bringing suit against our President? Might sound odd, but for some reason that has crossed my mind recently. Do most of our members know that a group of prominent physicians around the Washington D.C. area are doing just that? For some reason this complaint has flown under my radar screen and seems fairly substantial. If everyone is like myself they have gotten numerous updates, E-Mails, and various correspondence in regard to the controversy in our nation over the Healthcare Reform Bill. Well, a group of nine physicians have filed a complaint before U.S. District Judge Peter Messitte claiming that the pending Healthcare Reform Bill, if passed, would have a devastating impact on American medicine, with the loss of the practice of medicine as we know it. These "angry nine" (they must be baseball fans) filed the affidavit that says this unconstitutional bill would: 1) eliminate the sacred bond of the physician and patient; 2) ensure the retirement of many physicians immediately; 3) force patients into an impersonal system operated by civil servants; 4) ensure fewer students will opt to go to medical school; 4) deny citizens access to medical care of their own choosing; and 5) force physicians to practice medicine deficiently.

Wow! Nothing like having some angry docs taking some action into their own hands. For some reason I don't remember reading about anything like this in the Vindy, or USA Today even. What I'm impressed with is that the Angry Nine must have gotten their hands on the Healthcare Reform Bill and have actually read the document. I assume the judge will also have to read it as well - effectively doubling the number of US citizens that have actually read the thing. I know I couldn't ever imagine clearing my busy schedule to try to read the 2000+ page document or getting enough coffee on board to stay up to get through it. I'm glad someone has. I have a copy of the original complaint and affidavit and will get you a copy if you so desire.

I would also like to take this opportunity to thank Dr. Tom Boniface for his years of being Editor of this newsletter. His dedication and years of service are greatly appreciated. We can only hope the next editor will serve as long. Thanks to Dr. Mick Engle for volunteering.

Drank Beeno

#### Bits 'n' Pieces

The following doctors have retired: Kong Tatt Oh, MD Shawki N. Habib, MD

The following doctors have been reinstated to membership: Adrian leraci, DO Ann M Stover, MD Albert M. Bleggi, MD

The following doctors have moved: Robert C. McClusky St. Elizabeth Health Center 1044 Belmont Ave. Youngstown, OH 44501

Angela L. Roberts, MD 5170 Belmont Ave. Youngstown, OH 44505 330-759-2511

Vivian I. Starr, DO Primary Care Associates 602 Parmalee Ave. Suite 400 Youngstown, OH 44510 330-747-8611

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#### 2010 Membership Dues

2010 Membership Dues were due by December 31, 2009. If you have not already paid your 2010 dues, please do so immediately. Membership services will be terminated on March 31, 2010 for those who have not paid dues. You may pay your dues by credit card or set up a payment plan by calling the Society office at 330-533-4880.

#### **NEW TICKET POLICY**

Due to budget constraints, the MCMS will not be offering free event tickets to members this year. We will, however, continue the event program and offer premium tickets to our members. If you have attended events in the past, you know that we always get the "best seats in the house", and we will continue to do that. Because members will be paying for all tickets, we will now allow you to buy as many tickets for each event that you want. If you would like us to get tickets for a particular event, call the office at 330-533-4880 and we will put that event on our calendar if at all possible. The next upcoming event is the Ringling Brothers Barnum & Bailey Circus on Friday, March 5, 2010, at the Covelli Centre. Information and a ticket order form are included in this newsletter.

#### "Suck It Up, America" Continued from Page 1

We've become a nation of hypochondriacs. Every sneeze is swine flu, every headache a tumor. And at great expense, we deliver fantastically prompt, thorough and largely unnecessary care.

There is tremendous financial pressure on physicians to keep patients happy. But unlike business, in medicine the customer isn't always right. Sometimes a doctor needs to show tough love and deny patients the quick fix.

A good physician needs to have the guts to stand up to people and tell them that their baby gets ear infections because they smoke cigarettes. That it's time to admit they are alcoholics. That they need to suck it up and deal with discomfort because narcotics will just make everything worse. That what's really wrong with them is that they are just too damned fat. Unfortunately, this type of advice rarely leads to high patient satisfaction scores.

Modern medicine is a blessing which improves all our lives. But until we start educating the general populace about what really affects health and what a doctor is capable (and more importantly, incapable) of fixing, we will continue to waste a large portion of our health-care dollar on treatments which just don't make any difference.

Dr. Thomas A. Doyle is a specialist in emergency medicine who practices in Sewickley, PA (tomdoy@aol.com). This is an excerpt from a book he is writing called "Suck It Up, America: The Tough Choices Needed for Real Health-Care Reform." Reprinted with permission from Dr. Doyle.

#### **NEW MEMBERS**

Danny Sankovic, MD

General Surgery

1515 E. State Street Salem, OH 44460

Medical Education: NEOUCOM, Rootstown, OH Internship: St. Thomas Hospital, Akron, OH Residency: St. Elizabeth Health Center

Leszak Fiutowski, MD Cardiovascular Disease

Ohio Heart Institute 1001 Belmont Ave. Youngstown, OH 44504

Medical Education: University of Alberta, Edmonton, Alberta Internship: University of Alberta, Edmonton, Alberta Center, Springfield, MA Fellowship: University of Alberta, Edmonton, Alberta D.C. General Hospital, Washington, D.C. Bay State Medical Center, Springfield, MA Bay State Medical Center, Springfield, MA

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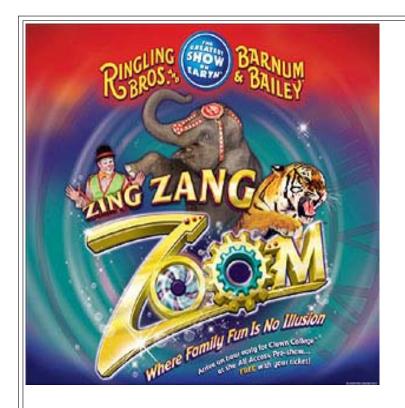
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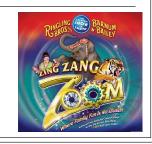
Mahoning County Medical Society members may order as many tickets as they wish. Tickets will be sold on a first-come, first-served basis.

Free tickets are no longer offered.

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Demetrios J. Dallis, MD December 19, 1928~ November 6, 2009

Jacques Politi, MD August 10, 1936 ~ December 2, 2009

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