



## Voices of Medicine

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By Del Meyer, MD

**A hospital crisis, an epidural that wasn't, and the curse of interesting times.**

### **Between Danger and Opportunity**

Luther F. Cobb, MD, wrote on "Crises" in his president's message in *The Bulletin* of April 2006, published monthly by the Humboldt-Del Norte Medical Society. [This is an important message for our medical society. For background of the hospital crises in Humboldt, and how important the issues are to physicians who can only speak effectively through their medical societies, and read one of the Op-Ed articles at [www.humboldt1.com/~medsoc/images/bulletins/APRIL%202006%20BULLETIN%20for%20web.pdf](http://www.humboldt1.com/~medsoc/images/bulletins/APRIL%202006%20BULLETIN%20for%20web.pdf).]

"I'll admit that I don't speak or read Chinese, and it may just be an urban legend. But I've been told that the Chinese character for the concept of 'crisis' is the conjunction of the pictographs for 'danger' and 'opportunity.' This strikes me as an appropriate metaphor for the recent events locally with St. Joseph Hospital. I'm sure we all have our own ideas about the reasons for the current difficulties, and many of us in the medical profession, as well as elsewhere, are only too happy to point out our own candidates for scapegoat. However, I don't think that gloating over others' misfortunes or misjudgments will get us very far, even though it may be a personally satisfying exercise in Schadenfreude.

"We often talk about being behind the 'Redwood Curtain,' but I think a more appropriate metaphor may be a goldfish tank. You may have noticed while feeding your (or in my case my college kid's) fish in an aquarium that while you're putting fish food in the top of the tank, the fish have to swim around in water containing the ultimate processed residue of the food you put in over the last days and weeks. It seems to me that we often battle over issues pertaining to our own little share of the medical universe, trying to look out for our own. Certainly, there must be a goodly amount of attention paid to our own turf and responsibilities. But I also believe that we ought to be considering the future welfare and viability of the system as a whole. We are participating in building and maintaining the system that will be around this area for a long time to come. When we need medical, hospital, and yes even nursing home care for ourselves and the rest of our family, we will have to contend with the system that we have created together...

"I have discussed the participation of the Medical Society with Joe Mark, the new CEO of St. Joseph Hospital, who is open and welcoming to our organization's help and advice.

"This apparently dangerous situation may turn out to be a great opportunity for ourselves, our patients, and the whole community. I certainly hope so."

To read the entire message, go to [www.humboldt1.com/~medsoc/images/bulletins/](http://www.humboldt1.com/~medsoc/images/bulletins/)

### **An Epidural to Remember**

The Spring 2006 *Sonoma Medicine*, the magazine of the Sonoma County Medical Association was devoted to clinical empathy. One article, The Saline Solution by editor Steve Osborn, began this way:

"The placebo effect has been defined as 'a physical or emotional change, occurring after a substance is administered, that is not the result of any special property of the substance.' As part of this theme issue on clinical empathy, we decided to investigate the placebo effect, so we sent local physicians an informal survey consisting of the following question: 'What experiences, if any, have you had with the placebo effect when caring for your patients?'"

This was one response.

"The most amazing placebo response I ever witnessed was as a scared first-year resident doing OB. A very obese woman came in with active labor. When I went to check on her, she was already completely dilated, and the head was well within the vagina.

"Time to push,' I said.

"No way, not without my epidural!' she exclaimed adamantly.

"Please!' I begged.

"No!' she replied, and laid down and groaned and screamed for her epidural.

"OK, OK!' I shouted, and demanded the nurse bring me the epidural cart.

"The patient sat up obediently. With trembling hands, I cleaned the skin and proceeded to push a spinal needle through the layers of fat toward what I prayed was an interspace. No luck: bone. I withdrew the needle.

"Before I could say anything, the patient promptly laid down, said, 'Thank you,' and proceeded to push out a healthy 9-pound boy.

"Thank you, doctor, for giving me the epidural,' she said. 'My friends were right: it really helps.'

"Speechless, I merely stammered, 'You're welcome.' -Herb Brosbe, MD"

To read the other placebo stories, go to [www.scma.org/magazine/scp/sp06/osborn.html](http://www.scma.org/magazine/scp/sp06/osborn.html)

### **Changing Times, Interesting Times**

In the Santa Barbara County Medical Society *News*, president Christopher V. Lambert, MD, wrote A Point of View.

"May You Live in Interesting Times...' Ancient Chinese curse

"...We are living in interesting times for medicine, needless to say. Change and challenge approach us from many directions. My focus this month is on the ever growing influence of government on the practice of medicine, and our need to be involved.

"Lee Hamilton spent 34 years in the United States Congress. He chaired the 9/11 Commission, and now heads the Center for Congress at Indiana University. He is in his early 70's and still actively involved in leadership. He was interviewed recently on CSPAN, where the discussion turned to the Abramoff investigation. Hamilton was asked what changes he had observed in Congress over his 34 years.

"He replied, 'There has been a sea change in the mindset of people about government.

When I was elected to Congress in 1964, the constant theme I remember was "get government off my back," which I heard from everyone. Now, what you hear is, "what can government do for me?"

"...This observation certainly holds true for health care. The federal government first intervened in healthcare with Medicare and Medicaid, then with EMTALA (Emergency Medical Treatment And Labor Act) and other unfunded mandates, now with Medicare Part D. Meanwhile in California the number of legislative bills involving health care sent to the State Assembly expands ever more rapidly. Issues of reimbursement, contract dispute resolution, scope of practice, even continuing education mandates all have the potential to be passed into law. While one can wish for a simpler local solution to many healthcare issues, the size and complexity of the health care system makes government legislative solutions the 'arena of last resort.' We must acknowledge this reality, while insisting that decisions at the legislative level need to be made in the best interests of our patients and our physicians, and that in order for this to happen the legislators must receive accurate and timely information, guidance and opinions from us. This requires constant diligence on our part. We must accept the importance of lobbyists and political contacts to move our agendas forward."

The entire President's message, is at  
[www.sbmed.org/public/components/societytools/admin/viewNewnews.asp?  
newsjob=ArticleID&ArticleID=6820&ArticleName=President%  
27s+Point+of+View++January%2FFebruary+2006](http://www.sbmed.org/public/components/societytools/admin/viewNewnews.asp?newsjob=ArticleID&ArticleID=6820&ArticleName=President%27s+Point+of+View++January%2FFebruary+2006)

[delmeyer@healthcarecom.net](mailto:delmeyer@healthcarecom.net)

Sierra Sacramento Valley Medical Society  
5380 Elvas Avenue #100 • Sacramento, CA 95819  
916.452.2671 PH • 916.452.2690 FX • Email: [info@ssvms.org](mailto:info@ssvms.org)

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