

Crisis in Medicine: Education, a Vehicle That Brings Us Together

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"New opinions are always suspected, and usually opposed, without any other reason but because they are not already common."

—John Locke, English philosopher

How often are we told by non-physician third parties how to do things, when to do things, and if we are even allowed to treat patients? How often do we foolishly mistreat a colleague

within our own profession? This way of thinking and loss of control has caused many of us to retreat instead of taking the advice of great sports-minded athletes that "the best defense is a strong offense." My hope is that we will become less divided, more united, and more willing to accept individuality of thought and progressive ideas.

The first inaugural Emerging Techniques in Orthopedics, Sports Medicine and Arthroscopic Surgery meeting in December 2011, sponsored by *The American Journal of Orthopedics* and The Orthopaedic Foundation for Active Lifestyles (www.ofals.org) has come and gone. Many lessons were learned from this exciting educational opportunity. I was honored to chair 50 faculty members who debated each other with strength and civility so that there could be frank and meaningful exploration of many of the most complex issues in knee, shoulder, and hip surgery. This 2 1/2 day conference taught us that we can get to a consensus statement, alter how we treat our patients with the newest thoughts and patient safety, and still treat each other with respect and dignity. I am indebted to this group of men and women, especially Richard Hawkins, MD, and Russell Warren, MD, who, as honored professors, gave not only the perspective of evidence



based medicine, but taught us how to achieve better outcomes for our patients.

Last year's meeting also had a special section led by Jack Bert, MD, on Practice Management. How timely was it to hear and learn how we can continue the practice of medicine without third parties trying to change the face of our great field? We learned that too many of us have chosen to end private practice as we know it and join large corporate models/hospitals. Does this truly benefit the consumer? Playing it safe has never let our profession rise to the top. The faculty helped question our decisions and taught us how we can still succeed on our own without the interference of others.

We look forward to this year's Emerging Techniques in Orthopedics: An International Perspective conference, which takes place December 6-8, 2012. It will prove to be even more exciting with the continued debate format. Invited faculty from France, Spain, Brazil, and Italy will challenge all of us on a global perspective. Our honored professors will include, John Bergfeld, MD (knee), James Esch, MD (shoulder), and Gilles Walch, MD (international guest).

New sections will tackle the care of pediatric sports injuries, nonoperative treatment of osteoarthritis from steroids, glucosamine, platelet rich plasma, and advances in minimal invasive prosthetic shoulder replacement—does it make a difference, and the utilization of allografts—speed, cost, does it make sense. Our no holds barred debates on anterior cruciate ligament surgery, shoulder instability, arthroscopic rotator cuff repair without anchors, techniques of labral repair in hip arthroscopy, and more importantly, complications we have dreaded, seen, and fear with ways to remedy will be featured once again.

It is my hope that this conference will continue to create stimulating discussions. In these confusing and

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upsetting times, we will learn how fact meets fiction in our profession as we struggle, no different from others, in our society. It is our time to allow for structured chaos, both in the classroom in Las Vegas this December, and even more importantly, back in our practices at home. The crisis of medicine is upon us. If rules are to be made, we need to be there to help make them, and most importantly, be kind to each other. We must learn to ask for fairness from our administrators, nurses, and politicians as we navigate our new lives, while always keeping patients and their well being as the number one credo. This conference of sharing ideas, I believe, is a start. Some new opinions may not be well received, but they give us time to think and what to think about.

I am proud to have been the vehicle to bring all of us together and will do so again this December. Until then,

we must each prepare for small challenges, whether it be educating our patients on insurance issues, understanding malpractice, helping for cost containment, or allowing the public to be educated on surgery centers and their utilization versus hospitals for certain procedures to save health-care cost dollars.

Is there a crisis in medicine? Yes. It is time to get involved and be proud of what we do. I hope we will all come together to help each other, because together we will succeed and maintain decision-making in the hands of the doctors.

AUTHOR'S DISCLOSURE STATEMENT

Dr. Plancher wishes to disclose that he is Conference Chair of the Emerging Techniques in Orthopedics meetings.