

EDITORIAL

BETTER SURGEONS GET BETTER RESULTS

In the present day scenario of mushrooming medical education, with every body rushing to get a medical degree, medical training in general and surgery in specific is facing a crisis.

At this time when entry to surgical training is becoming more restricted, but progression is less restricted. The examination structure is in the melting pot and audit is becoming obligatory. The question erupts "why do better surgeons get better results".

To define a "Good Surgeon" is difficult but evidence dictates that outcome in terms of morbidity and mortality after various operations is variable according to the surgeon incharge of a unit. Several personal attributes interplay to make for a surgical quality and these are inevitably unevenly distributed among individuals. There are certain other characteristics of a surgeon which bring out or produce a visible contrast. Once a surgeon shows his presence, charisma, affability and compassion "CONFIDENCE" is instilled into patient and it is certainly a comforting feeling. Confidence, patience alertness and sincerity are the key words to success.

Good management and sound judgment are characteristics to elicit bright results. For example in emergency abdominal surgery judgment determines the decision for or against surgery and also the nature and magnitude of operation. As judgment matures (it may take many years) a surgeon becomes more conservative and less interventional. Laziness however, has a similar effect.

In addition it is one of the biggest defects of surgical care in Pakistan that many emergency management decisions are made by trainees who are at times, rather most of the times, out of their depth.

As consultants with passage of time, increasingly delegate the responsibilities of emergency decision making and intervention, they themselves lose their sharpness through lack of use and declining confidence. The remedy is that consultants should involve themselves more frequently in emergencies.

The other element of success story is conscious pursuit of surgical simplicity, i.e to avoid operation whenever possible. Simplicity the achievement of the desired end with maximum economy of means, is the holy grail of most artistic endeavour and is also central to surgical quality. Aside from determining decision making, simplicity is the watch word for intra operative manoeuvre - excisional and reconstructive for example in other encumbrances to restoration of normality.

At operating table, quality is likely to depend on discipline, ritual and technique. Discipline begins with punctuality, a small point, which none the less sets the scene. It should be instilled to all the staff in the operating room. Surgeon observes this principle in spirit not only by his physical presence, but also in the selection, preparation of instruments, use of threads etc execution of operation and disposal of instrument and linen, at the given top priority and discipline is the crown, if worn by head of the team it effects the whole team automatically.

Surgical instruments and threads are designed for specific tasks and their correct and selective use is part of the pleasure of operative surgery. There is room for selective use of diathermy. The forceps should be fine and the bleeding vessel alone accurately grasped. It offends to see charred fat spreading around a vessel imprecisely grasped with broad pointed forceps.

Strict discipline is ritual. It is part of ritual to use wound towels, avoid contact with exposed skin, change instruments and gloves, in case of potential or actual contamination.

There are special rituals for specific operations and most operations lend themselves to reutilization.

A stepwise sequence of maneuvers to be used without unnecessary departure becomes the template for each procedure so that as a as possible operations become standardized.

A set pathway leading in the most direct and simple way from start to finish is repeatedly followed. All become familiar with the route and the requirements at each stage enroute are know and anticipated. Over the years, such ritual naturally evolves as steps and movements perceived to be superfluous are discarded. The team head makes the foot print of the principles and then ensures the drill of success. It is worth to state that practice is work and work is pleasure.

The pursuit of simplicity, economy in investigations, intervention and operative strategy, the pursuit of discipline and the evolution of ritual, require recognitions of the importance of constant and repeated participation of consultants.

The conductor who seldom conducts, the musician who seldom plays, the artist who paints only occasionally and a surgeon who operates sparsely, fade into mediocrity. So it is with the surgeon who does not maintain his skills and even more so, when it comes to technique possibly the most important quality and most difficult to analyze - a point to which we shall emphasise to prove that "better surgeons get better results".

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