Medicine from the Heart

By Ivy Ng

he medical profession remains, as always, a soughtafter career and most parents still consider it an ideal career option for their children. My motivation to pursue a medical career stems from the vivid memories of losing my loved ones to the ravages of illnesses. I remember the feeling of helplessness while standing by the bedside during my grandmother's passing that made me more determined to become a doctor.

The contemporary healthcare scene is evolving. There seems to be an emerging demand for doctors who are both technologically competent and experienced in a wide range of medical specialisations. Many of us find ourselves in a great quandary as to whether to become a medical research scientist or to be a clinical doctor. I was told by my seniors that it was, for them, a difficult decision to make. In most cases, their enthusiasm and strengths in science subjects could probably equip them to be excellent research scientists, and yet the idea of the noble cause of practising Medicine greatly enamoured them. Who knows - those who choose to do Medicine could very well be the ones to cast more light on the workings of the brain and its many unsolved mysteries. Personally, with more colleges offering unconventional routes to medical school, the idea of being trained in both areas really appeals to me. After a fair amount of consideration, it seems logical for research scientists to be working closely with patients connected to their field of study. After all, it is through patient contact that one can gain invaluable insights into what they really need.

After my attachment at the National Cancer Centre (NCC), two issues became apparent to me. Firstly, many people are still not fully aware of the kind of life doctors lead. From this problem stems the second – blurring the divide between clinical work and research may produce unrealistic expectations. Doctors have to cope with long working hours, and an additional and possibly heavy commitment to research could potentially compromise the attention given to patients. Hence, instead of reaping the benefits of the two fields by combining them, might this be doing the ideals of the medical profession a disfavour?

As a student hoping to enter medical school, the importance of an attachment to a medical centre prior to applying to medical school should be emphasised. Having had clinical attachment exposure is often thought to make someone a stronger medical school candidate. For me, it was during my attachment that I got to see, firsthand, both the tough and rewarding sides of the profession. With this experience, I am now able to make a more informed choice. Honestly, no one applying to medical school should miss such an opportunity to understand what to expect.

It was also my attachment experience that has strengthened my decision to become a doctor. Being a doctor is not just about prescribing medicine to right what has gone wrong in the body. During my attachment at NCC, where it is common



for patients to have grim prognoses, I noticed that doctors very often have to strike a balance between maintaining a professional distance and establishing a close doctor-patient relationship. It was after I spoke to several patients that I came to the conclusion that a doctor's empathy is very much appreciated. Surprisingly to me, many patients were comforted simply by the warm-heartedness of their physicians. In other words, a good doctor-patient relationship could have an important "therapeutic" effect.

I am also drawn to the uniqueness of the doctor-patient relationship. The basis of such a relationship is founded on trust and confidentiality. It is amazing how we are able to confide in our doctors and disclose details we sometimes find embarrassing to tell even our closest friend. Furthermore, we do not see reason to refuse a doctor their request to examine our bodies as part of the clinical assessment.

Sadly, despite the fact that the importance of a good doctor-patient relationship is recognised, there is a trend on the rise known as "health consumerism". It involves a shift from the previously valued doctor-patient relationship to a provider-consumer relationship, and has resulted in more contractual and conflicting relationships between doctor and patient. Perhaps, this change is inevitable in a nation whose population is increasingly well-educated. But my concerns lie in how much autonomy doctors would be given in future, with patients constantly challenging medical authority, and how much a doctor's judgment could be compromised if they live in perpetual fear of being sued.

It is extremely easy to be captivated by the medical profession. But the decision to pursue Medicine should always be carefully considered, and ultimately, must come straight from the heart. The rapidly changing healthcare sector may appear daunting, but since the role of doctors would be based on the Hippocratic Oath, I am certain that a profession that heals will always command respect.





About the author:
Ivy is a fresh graduate
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