

Three Things That Will Affect You in 2005

By Dr Lee Pheng Soon, President



Three events, very important to medical practice, happened at the turn of the year, all within three weeks. Of these, two will have recurring impact on our lives this year.

The first is the way the medical profession responded to the 26 December Tsunami. Some of us closed our clinics, some took on extra duties of colleagues to free them to volunteer, and some organised collections of drugs and supplies for dispatch. All of this was done very quietly, without fuss, fanfare, or expectation of advantage – indeed, sometimes at significant personal sacrifice. *The Straits Times* reported an Aceh patient's comment, that Singapore doctors do not say much, but do a lot. What a wonderful tribute. Your colleagues who did not, or could not, go with you salute you. You saved lives and limbs, and brought relief to suffering, to people who had nothing. Without realising it, you also brought honour to the medical profession.

Second, on 1 and 9 January, two articles were published in *The Straits Times*, speculating on what was eventually confirmed as a non-entity – that doctors were soon to be stopped from dispensing in their clinics. That this was impending, was eventually denied with several statements from the Ministry of Health (MOH). Even the Minister was quoted as saying that he did not think that this would make “any significant contribution to improving our healthcare system”. But hidden in the speculation of the second article were comments that offended many doctors, and indeed angered some of their patients. On behalf of all doctors, the SMA was forced to respond with a public query to the Health Correspondent, asking her to confirm some of her statements. These had suggested that doctors in private practice had lobbied the MOH against this change because it would affect their earnings; speculated that patients had to visit their doctors a second time because of a deliberate use of a sub-effective dose the first time; and without justification, used the adjective “self-serving” to describe the medical profession. The SMA's letter was published in the *ST Forum Page* and posted on the SMA website, and the importance of this clarification was reiterated by *The Sunday Times* (16 January) in its own “Did They Really Say That?” column. In spite of this, we have yet to receive the Health Correspondent's response. The foundation (if any) of such charges must be established because they affect doctor-patient trust in our society, something central to the effective (indeed, the cost-effective) practice of medicine in Singapore.

Third, on 13 January, the Director of Medical Services spoke with the SMA Council, sharing his vision of how (mainly primary) healthcare might progress in 2005 and the years ahead. The main parts that had been fleshed out

enough to be shared meaningfully, are reported in this issue of the *SMA News* (see pages 6 and 7). That the Ministry was prepared to participate in frank and open dialogue with the SMA, at such an early stage of planning, is an excellent sign. It means that the MOH is seriously seeking feedback from those it relies on to implement their vision, and prepared to engage the SMA in constructive dialogue at an earlier stage than ever before. It also means that each of us, especially those in primary healthcare, can in our individual ways start preparing ourselves and our practices for change, in a planned, systematic manner, so we can all serve our patients better.

I feel that these three events are equally important to us. The first, the response of doctors to the Tsunami, reminds all Singaporeans of the reason we are doctors, and that deep inside resides a noble reason for our work. The second, the willingness of the SMA to openly challenge unsubstantiated and public hints of impropriety in our profession, tells you that your organisation will fight to prevent erosion of the critical trust that now exists between individual patients and you, their doctors. The last, the active steps taken by the MOH to discuss with the SMA its vision before implementation, promises at long last a measure of true partnership between us – soldiers on the ground, and the leaders in HQ planning campaigns for the public good. Inadequate commitment to any one of the above three would seriously hamper us moving forward in offering better care for our patients.

The acute relief phase in response to the Tsunami is now over, and many of our colleagues are headed home, though much work remains for the local community. The furore from *The Straits and Sunday Times* articles has died down, though residual distrust unfortunately lingers from allegations still unexplained. But if doctors are to offer the best to our community and our patients in the future, it is the future we need to concentrate on. This is offered by the sincere effort we must make, to refine in partnership the vision expressed by the MOH, to better claim the promise it brings to all Singaporeans, doctors and patients alike. It is forward, that we must go. As a prophet in the Old Testament put it: “Without a vision, the people perish.” Or put another way, without the “Maju-lah!”, the spirit of healthcare in Singapore will be very hollow indeed. ■



About the author:

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