

LETTER FROM THE EDITOR



I was recently visited by one of my favorite pharmaceutical representatives. He came bearing unexpected news: he was leaving his company. He had been with a couple in the many years that I had known him, and recognizing the nature of the industry, I was not terribly surprised. However, he revealed that he was not moving to another company, but instead going to medical school! When he was a younger man in Trinidad, he had been accepted to medical school but was unable to attend because his family did not have the means to send him. So, he went into industry and did well at his default profession. Now, at the age of 45 years, he was making quite the bold move, losing his stock options and forgoing an income to fulfill his life's dream. I am very proud of him. It took a lot of courage to embark on that new journey, and I wish him luck and will look forward to hearing about his experiences.

Ironically, a few days later I was asked by one of our fellows whether, if I had to do it over again, I would pursue medicine. Rather than reflexively blurting "Of course!", I actually pondered the matter quite a bit before responding. I have received so much personal satisfaction from my efforts in caring for patients, in educating young physicians, and in making newer and better treatments available for improving patient outcome. My professional life has been filled with a great deal of variety, more than that allowed by most other professions. Yet, the not so brave new world of medicine is overburdened with regulations and focused more on reimbursement than on—what should be—more important considerations. I have written before in this editor's letter about my concerns regarding the limitations in resident hours and patient volume, only to find that these restrictions have further increased to the point where, if an intern were to complain of being tired, a ride home and delivery of his or her personal vehicle would be provided. In the name of safety, protecting patients from the overtired, and thus presumably careless, physician has been replaced

by subjecting patients to an inexperienced and undereducated doctor.

Whilst considering the question posed to me, I had time to peruse the current issue of *Clinical Advances in Hematology & Oncology* and was delighted to find it full of excellent articles. Drs. Philip Friedlander and F. Stephen Hodi describe advances in targeted therapy for melanoma, and Drs. Melinda L. Telli and James M. Ford discuss PARP inhibitors in breast cancer. In our columns, Dr. David Meltzer examines cost-effectiveness analysis in oncology, Dr. Andrew D. Seidman describes brain metastases from breast cancer, and Dr. Owen O'Connor provides an update in T-cell lymphoma. In addition, Dr. S. Gerald Sandler discusses antibody detection and identification in the chronically transfused patient.

So, how did I answer the question? I thought about the alternatives: I would love to play music for a living. I would enjoy working in a pen shop. Yet, I created this universe for myself, full of things I love to do, and I can't see myself doing something other than what I am doing for as long as I am able to do it. I would certainly have done it again if I knew then what I know now. But—could I still have become me in this new environment, and would I still have been satisfied with the options my training afforded me? I am not sure.

Therefore, when I become seriously ill, I would prefer my care be provided by someone with hair as gray as mine who makes decisions actually based on experience, rather than by a younger, well-rested doctor who was reared on virtual medicine.

Until next month . . .

A handwritten signature in cursive script that reads "Bruce D. Cheson".

Bruce D. Cheson, MD