Back Together: Rebuilding Our Professional Culture

I f you are like me, the weight of the pandemic has become so chronic that you have forgotten what the old way of life felt like. Undoubtedly, some good things have come from the changes: less commuting time may have made you work more efficiently; less travel may have led to greater consistency regarding your diet, exercise, and sleep; and perhaps you have even grown more appreciative of your inner circle of family, friends, and close associates, even if they have shrunk in number. I hope that we never lose these priorities as the world changes. Make no mistake, however—the world is constantly changing, more quickly now than at any time in recent memory. Some changes are obvious and immediate, such as staff turnover. Other changes are more subtle, but just as demoralizing.

Professional isolation is not a concept we talk about much. For most of us, practicing oncology requires interactions with all kinds of medical specialists, including surgeons, radiation oncologists, medical oncologists, palliative care physicians, pathologists, and radiologists. Although it is true that we may have become more efficient in our work, it is more stressful and less satisfying than before. Clinical work in particular is less connected than it once was, with fewer in-person interactions. For instance, many of our tumor boards are now virtual, and more of our professional interactions are by phone or email rather than in person. I find myself rounding less than I once did, and rarely seeking out face-to-face interactions with colleagues. On the academic side, our writing is less personal and more transactional, as Google Docs and other shared media platforms have replaced live meetings with co-authors to discuss a manuscript, research grant, clinical trial, or concept. The creativity and enthusiasm that come from in-person interactions have gone missing. As physician leaders, it is our responsibility to rebuild our own community work cultures. Despite the ups and downs of coronavirus spikes, we must find ways to create more face-to-face interactions if we want to regain the environment that inspired our staff and colleagues around our group mission. The fact is, we all need to contribute to rebuild our professional culture on a national level.

I used to look forward to professional meetings each year, including the excitement of seeing new data in our field for the first time, in person. Sure, the data are all posted online just minutes after each presentation, but listening to the presentations live—in the



presence of thousands of peers—provides a meaningful connection. Missing that piece of professional development for the past two years, combined with the other challenges facing us in our workplaces, has left many of us feeling professionally isolated.

I re-experienced some of what I was missing on a professional level when I attended the ASCO Genitourinary Cancer Symposium in February of this year. It was the first large cancer conference I had attended since the pandemic, and I almost didn't go because of the January spike in Omicron cases. February saw a decline in infections, however, so I went. Attendance was only about half that of pre-pandemic levels, but the interactions with colleagues were heartwarming. Social media blew up with selfies of friends none of us had seen in years. The joy of seeing new data emerge while in a room with not just our colleagues, but our "people," was palpable. I had forgotten what it was like to discuss how a new treatment paradigm was going to change our field, or not, and what would come next. I came away tired and a few pounds heavier, but re-invigorated by a recognition of what I have been missing from the past, and why these conferences with a community of colleagues who have shared similar hardships, burdens, and stressors are so important to maintaining my focus and resolve for the future.

By the time you read this commentary, the annual meeting of ASCO 2022 will be upon us. I hope you are here with me and perhaps can come by our modest booth (we are celebrating our 20th year of publication) to introduce yourself or say hello. Most of all, I hope we can use this meeting to reconnect—or connect for the first time—and share in the excitement, the hope, and the camaraderie of ASCO known by those of us practicing and caring for patients with cancer.

Sincerely,

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Daniel J. George, MD