

By Dr Wong Chiang Yin, SMA President

A Profession in Pain

Welcome Address by Dr Wong Chiang Yin, SMA President,
at the 48th SMA Annual Dinner

Good Evening, our Guest of Honour, Ms Yong Ying-I, Permanent Secretary for Health, Honorary Members, teachers, friends and colleagues. Tonight we are gathered here for our annual dinner at Regent Hotel again after two years. I shall be careful in what I say tonight, remembering well that two years ago on this same stage, Senior Minister Goh told me that we are being monitored by CCTV.

Recently I was returned unopposed as President for a third term in a quiet Annual General Meeting (AGM). I am extremely honoured and humbled by this. Only four persons have served three consecutive terms as President before me – Dr Yong Nen Khiong, Dr Tan Kok Soo, Dr Cheong Pak Yean and Dr Lee Pheng Soon. I count myself woefully inadequate to be in such esteemed company. In all likelihood, next year there will be a new President who will address you at this forum.

So for tonight, while this is a short pre-dinner speech, I will attempt to address some issues that weigh heavily on my heart. And that is the pain that the profession is going through. As we are taught in medical school, pain is a warning response to noxious stimuli or insult. While pain is unwanted, pain exists because we are neurologically intact. So pain is not necessarily a bad thing. A painless existence can be both very good and very bad. It is good

if there is no noxious stimulus and we are living in a safe and comfortable environment and functioning well. It can also be that we are so obtunded and desensitised that we feel no pain even when things are falling apart. Or we feel no pain because we are already dead.

Let us first admit that many of us feel pain at the way things are going. The way we had to withdraw our *SMA Guideline of Fees* last year, the recent debate over aesthetic medicine, the need for itemised billing and new financial counselling requirements foisted on us and the relentless doctor bashing by the newspapers and some reporters have created much pain. Today's article by Prof Lee Wei Ling in *The Straits Times* describes some of these pains as well.

The fact that we feel pain when such issues are discussed means that all is not well but at least we are alive and kicking.

The next question is what are we going to do about pain? Do we do nothing and endure, and get slowly desensitised? Or do we do something – Seek treatment, withdraw from the noxious stimulus or what?

For me personally, much of the pain is in what the SMA should do. The SMA would like to profess the highest ethical standards and shout it from the mountain top. I would also like to believe that most of us do ascribe and practise these high standards. But the truth is, a few of



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our colleagues do fall short of the highest ethical standards and the media will always highlight these few and the rest are tainted by mere association. So we could always be outflanked in this way by people working in the mass media who go all out to win trophies and prizes at our profession's expense.

Another source of pain is the encroachment of market practices on the practice of medicine. The reluctant withdrawal of GOF is one example. The market says that as long as the patient agrees beforehand, over-charging does not exist. I am personally uncomfortable with this. The SMA adapts by publishing practice cost surveys of GPs to educate everyone. The SMA will also be publishing another survey on specialists' fees soon. However, it is a hard battle to fight.

Will bill itemisation and increased financial counselling requirements effectively address some of the excesses that are happening now in terms of charging? I think not. But it may increase the practice costs of all doctors in private practice and this will have to be passed onto the patients. These increased practice costs will not be felt by people who charge a lot for a common operation but felt most by the GPs working in housing estates charging \$25 to \$35 a visit and their patients. What we need is not more blunder-bust statutory requirements but perhaps more targeted regulation at selected groups.

Another source of pain is managed care. Managed care in its current form now in Singapore is often not to the patient's or the doctor's best interests. If this trend continues, right-siting of care, development of primary care and good management of chronic diseases will be even harder to achieve.

Recently, I attended a lunch meeting with a senior politician together with a few other leaders from our sister organisations. He told us that one of the greatest assets of

our healthcare system is the level of trust and respect the public has for our medical profession. I cannot agree more. The truth is, we feel pain when the trust and standing we have with the public are degraded. We also feel pain because large segments of our profession are honourable people making an honest living. My biggest worry is that many honest doctors are getting disillusioned by more bad press, more onerous statutory requirements, and less income while a few not so honest ones are still carrying on with what they have been doing and being amply rewarded for doing so. When that happens, we are then stuck in a vicious cycle. This dire prospect keeps me up at night.

So this year, the SMA will tackle some of these serious sources of pain. I ask that you support the 49th Council in this difficult journey. None of us in the Council has anything to gain and maybe even much to lose by doing this. But we will do it because this is right and good for

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the profession in the long term. In a way, the journey has already begun. SMA has collaborated with *Lianhe Zaobao* to launch a series of weekly articles that we hope can help the public to better understand how doctors work, think and feel. The articles do not feature rich doctors in speedboats, designer wear and living the high life. Our SMA Medical Students' Assistance Fund helps to refocus the profession on its social mission and the importance of finding the right kind of talent. These are some of the things that we will continue to pursue in the year ahead even as we launch new initiatives.

This journey will require courage, strength and entail some pain. As the saying goes, "No Pain, No Gain". I hope that with all this pain, there will be some gain and the profession will come out stronger.

Thank you and have an enjoyable evening. ■