

EDITORIAL DOI: 10.15713/ins.bhj.72

The Making of a Neurologist

"Papa, all is well, I am settled in my new hostel and I am going to join my Neurology unit today, wish me luck!" Aditya made an early morning call as he was getting ready to join the new Neurology posting. Of course, his parents were delighted, and he had struggled so much to get admission to this prestigious course. Neurologists are so few in the country, only a few thousand for such a large population, and their son was entering such a respected specialty of medicine. The "brain doctor" holds a special place in the rank and file of medical professionals as he deals with the most complicated and perhaps most evolved organ in the human body.

Aditya's next call was to his fiancée, who was not a medical doctor. She was very concerned about the long working hours Aditya would have to put in, food issues, lack of rest, the distance he would have to travel to be there and most importantly, whether he would have time for her in the next few years. After all, specialty courses are very demanding.

As he prepared to go to the Neurology ward, he realized that he was wearing his white coat and taking his stethoscope with him for the first time in many months. These were the months he had spent in the library of the medical college, putting in efforts to be selected for this course and had stayed far away from the patients for whom he existed. Indeed, the price he paid for selection was to lose touch with the most essential part of medicine, patient care. In a country like ours, clinical medicine is what most Neurologists spend their time on and patient care is the most vital part of Neurology training. The situation in which Aditya found himself brings to mind William Osler's aphorism that "To study the phenomenon of disease without books is to sail an uncharted sea, while to study books without patients is not to go to sea at all." Aditya would ultimately need a balance that fitted his working environment.

In the large department in which he worked, he came into contact with fabulous senior Neurologists, and he kept thinking: one day I want to be like them. The effect of a role model in early parts of Neurology training is immense and probably decides to a large measure how the younger colleague's thinking will shape up. In real life, time and again one sees this happening, and the sterling traits of seniors are imparted and imprinted silently over the years. Institutions are made by individuals after all. It is partly one's destiny as to whom one will come in contact with, but in today's world of communication even "long distance gurus" can impart virtues to a large number of recipients.

Roll forward many months, Aditya found himself chatting with a colleague from another institution. Aditya lamented

Nadir Bharucha, Satish V. Khadilkar

Department of Neurology, Bombay Hospital Institute of Medical sciences, Mumbai, Maharashtra, India

Corresponding Author:

Satish V. Khadilkar, Room 110, 1st Floor, New Wing, Bombay Hospital Institute of Medical Sciences, Marine Lines, Mumbai, Maharashtra, India. E-mail: khadilkarsatish@gmail.com

the workload and the difficulties he faced in recommending investigations and treatments which might be appropriate but were expensive and hence out of reach. Despite expensive tests, many conditions remain undiagnosed. What had not dawned on Aditya was that he was learning how to diagnose by pattern recognition. In public hospitals, due to India's large population, a student sees examples of many conditions and even though all patients cannot be investigated fully, patterns start to emerge and become fixed in the student's mind. On the other hand, in private institutions, with fewer patients but where necessary investigations are feasible and where students can spend time reading, a clearer pattern of disease in the individual patient emerges. The situation is analogous to the parable of the blind men and an elephant, in which a group of blind men who have never come across an elephant before learn and imagine what the elephant is like by touching it. Each blind man feels a different part of the elephant's body, but only one part. They then describe the elephant based on their limited experience and each comes to an entirely different conclusion.

In his final year now, Aditya got an opportunity to attend a national neurological conference. He was struck by the way in which Neurologists presented their research, gave lectures and orations and understood the multiple facets of being a Neurologist. He also found it stimulating to meet students and teachers from other institutions.

In fact, every Neurologist has multiple abilities and desires. These span across clinical Neurology, patient care, academic Neurology, teachership and research Neurology. The expression of these depends on the circumstances, the role models and the individual preferences. Each facet requires different types of skills. For example, service neurology requires compassion, desire to help and persistence. Research neurology requires a dissecting mind which can probe the prevailing questions and design studies and methods to answer

Bharucha and Khadilkar Making of a neurologist

them. Teachership revolves around the ability to impart knowledge in a way which can be understood by the recipient.

We strongly believe that it is the senior consultant's role to understand and fathom the junior colleague's abilities and work toward their best expression. It is also important to bear in mind that youth and vigor may propel the young Neurologist to dabble in various arenas, and the grey-haired people around him can put this in perspective. Life is larger than medicine and one can only do bits and pieces; they must be well chosen.

The present prevailing situation of Neurological sciences in India is such that there is a shortage of clinical Neurologists. As a result, most trainees end up practicing service Neurology. In service Neurology, patient care is the ultimate goal and personal growth and professional growth needs to be centered around this. To be an effective clinical Neurologist one has to have the ability to listen to his patient, patient's family and friends, other caregivers and members of the treating team including nurses, therapists and other doctors. This is analogous to a three-legged stool: of which the treating Neurologist comprises only one of the legs. The desire to help coupled with the knowledge of the disease and the family structure decides the best treatment options in the given situation.

For successful Neurological practice, certain habits need to be inculcated. These are acknowledging one's ignorance, admitting errors, developing an approach which includes learning, an understanding of the cognitive biases, and openminded problem solving. Communicating effectively with the patient and family is an art in itself and a necessary art at that in the present times. The ask-tell-ask approach is usually adopted to first appreciate what the patient understands, then to convey information and finally to ask once more to ascertain changes in comprehension.

The successful Neurologist often has developed awareness of psychosocial and cultural factors and their contributions to illness and its perception. An example of epilepsy could be given wherein there may be elements of concealment owing to stigma, a belief in supernatural causes and traditional methods of health seeking. These should be taken into account when planning and explaining the treatment as care is likely to be prolonged and treatment regular. Furthermore, patients' well-being may involve more than just control of seizures.

A Neurologist often has to deal with progressive conditions for which treatment options are limited. It is important even in these circumstances to ensure that all are on the same page and that even in the absence of specific measures it is possible to provide comfort and physical and spiritual relief. India is still a low middle income country. An appreciation of measures of cost of treatment (direct or indirect) and an understanding of cost benefit ratio is significant especially so where expenses are out of pocket and prolonged absence from work without social security leads to financial stress to the entire family.

Training in Neuroepidemiology, statistics and medical ethics are very important for the Neurologist to enable him to understand scientific data plan studies and deal ethically with patients, whether in research or treatment settings.

For those who are planning an academic career in Neurology, finding the right setup within the country or outside the country becomes important as suitable setups are comparatively few in India. Finding mentorship and then being one, learning to collaborate at local, national and international levels can go a long way. Some individuals are fortunate to get positions as a physician scientist where they are able to spend time partly in clinical Neurology and partly in academic Neurology. In such situations, time management to enable balance of administration, clinical care and research teaching assumes relevance.

Considering all these aspects, it becomes very clear that the grooming of a Neurologist needs to start very early in the Neurology career and has to be fortified at various stages of life. Well-formed courses for Neurologists at various levels of their training and their life seem to be important in the long-term. Presently, such courses do not exist for the mid and later part of a Neurologist's career and will need to be designed. The system also needs to recognize different potentials of individuals and allow expression of these to the best of the possibilities of the setups.

We now come to the point of satisfaction and the ability to remain satisfied and the conflict with "the ladder." These dilemmas, applicable to individuals in all walks of life are also pertinent to Neurologists. While the concept of the ladder promotes a competitive edge, it conflicts with individual satisfaction. Here, we enter the realms of philosophy, the concepts of doer-ship, the fundamental nature of events and things and "the skin in the game." We must also appreciate that each one of us is so different that no single rule will apply broadly and that everybody's poison is different. That being said, the place of satisfaction cannot be underestimated in the totality of things.

Finally, Neurological careers start late but last long. And that brings to the fore the need to remain physically healthy and mentally active and to attend to oneself diligently to be able to better serve in one's professional capacity.

Hence, young Aditya has many things to consider and contemplate. He needs to acquire diverse skills and will need patience to do so. Ultimately, implementing these will enable him to become a successful, effective and satisfied Neurologist; whichever aspect of Neurology he and his Ikigai choose to pursue.

Both of us wish him well in this journey.

How to cite this article: Bharucha N, Khadilkar S. The Making of a Neurologist. Bombay Hosp J 2021;63(4):141-142.

Source of support: Nil, Conflicts of interest: None