Embracing Change to Keep Finding Joy in Medicine

KEITH L. CALLAHAN, MD, MBA

The last few years living with the COVID-19 pandemic has given me a chance to think about my life choices. Being told to stay home gave me a chance to reassess what was important, the second time that this has happened to me. More about that later. What helped me to find the joy in medicine again and again was adapting to new circumstances. I may not want to continuously adapt, but I have found that this is the only path to reset my compass toward joy in life.

I have always wanted to be a physician. I can't explain it. I can remember as far back as second grade having the distinct feeling that I wanted to help others. My sixth-grade graduation yearbook has a caption under my picture where I said that I wanted to be a pediatrician so that I could help children. I knew that becoming a physician would be a very difficult road.

I went to medical school in Chicago. I was introduced to working long hours in the hospital during my third and fourth years. I rotated with cardiovascular surgeons during my first rotation. I was in awe of the power they had to save lives. Since I had very little experience in medicine, I felt that what I was witnessing was how medicine would always be. I remember a specific teaching point that the chief cardiovascular surgeon told me. The surgeon opened a clogged artery to show me how much plaque was in it. I was amazed that any blood could get through it at all. As he prepared the vein to bypass that artery, he said these words to me: "These cardiologists, they think they can get a balloon in this...it will never work." Of course, I took his words to be the final pronouncement on this topic as he was the experienced surgeon and I was the medical student. This was 1993 and our institution had a balloon angioplasty 6-month re-occlusion rate of about 50%. We did not have stents at my institution yet, so he can be forgiven for holding on to the present and fighting against the future. I am sure that over time, he had to adapt to the new circumstances as technology changed. I realized later that this was my first example of how medicine is constantly changing.

Changing pathways

I chose to go into an Ob/Gyn residency after medical school. I matched in Chicago at a program across the street from my medical school. So, I was able to stay in the same apartment complex. I thought, "this is great." I will be doing what I really enjoy and will not have to change a thing. There was one variable that I did not fully anticipate. This will sound unbelievable, but it turns out I like to sleep regular hours. I thought I would adapt to the new schedule but I just never did. I chose to switch career tracks and went through the match again and entered family medicine. It was the best move I could have made. But, it required me to change how I viewed my life trajectory and what I would be doing to help others. After I made that change, I found joy again.

Very early on as an attending physician, I was working for a hospital affiliated with my medical school in Chicago. This is where, for the first time, I had the real sense that the whole world could change permanently in an instant. I was working in the hospital seeing patients and there were television sets in every room. I had heard that morning before work that a terrible accident had happened in New York City. A plane had hit one of the towers of the World Trade Center. I went to the hospital and started seeing patients. While I was talking to a patient, I looked up and saw an airplane strike the other tower of the World Trade Center. I knew immediately that my whole life and the whole world had changed. Airplanes around the world were grounded. Very few people traveled. I had a year to think about what was important to me. I decided family and friends were most important and made a point of reaching out and reconnecting. I had been feeling so overworked and I did not have the perspective that I had a very fortunate life. I changed my view on many things and found joy in medicine again.

Health care shifts

In 2010, the Affordable Care Act (ACA) caused the whole health care system to move in a new direction. Health care would no longer be a cottage industry. It would become more like a series of integrated health systems. I had trained under the old set of rules and had the image of a solo office and going in to do the best job I could for the individual in front of me. I had to confront the new reality. I have joined a large group of other physicians and have adapted. Once I changed how I viewed how my future looked, I found the joy in medicine again.

I had always expected to see patients in the inpatient and outpatient setting. During training, I had heard that there were hospitals experimenting with a new concept called hospitalist medicine. I remember going to lectures 25 years ago where I was told that someday the United States would



have a system where physicians were either working in the hospital or in the outpatient setting, just like the system in the United Kingdom. I remember thinking to myself, "There is no way that doctors will only work in the clinic or the hospital...it will never happen." As the hospitalist movement dramatically accelerated after the 2010 ACA, I was forced to confront a new reality. I would have to give something up. I fought this change as long as I could and was miserable trying to hold on to the past. In the end I chose to be an outpatient only physician. Once I made the change, I again found the joy in medicine.

Hospitalist vs. outpatient medicine

Making the change to only outpatient medicine has allowed me to pursue a completely new way of thinking and become involved in another aspect of helping patients, my community, and my profession. I became involved in advocacy. I have more regular hours and I am now involved in organized medicine at the state and national level in a variety of ways. I sit on interesting Boards and have the opportunity to go to Washington D.C. and meet with Senators and Congressmen to discuss issues. None of this would have happened for me if I was not forced to change course yet again. I was unhappy with how my career was going. But, after making the change, I found the joy in medicine again.

Now I have lived through the COVID-19 pandemic. This surprisingly reminds me of the national response to the tragedy of 9/11 early in my career. We were told not to fly. This time, we were also told not to leave the house. I have had time to think about the nature of the work I am being asked to do. I have had the time to reflect on how much personal sacrifice I have made and what kind of work load is sustainable over the long-term. Many clinicians have decided to exit medicine all together. They cannot see a world where they will be happy working in this environment. I have decided that I will adapt again. I did not chose this new situation. But, just as I have made the change so many times before, I will adapt. I know that there will be new and interesting things that will make me happy to be working in the best profession I could imagine.

I have learned that the secret to finding the joy in medicine is to recognize that change is happening whether I like it or not. Nothing that I see in front of me is permanent. Everything is changing slowly, and then very fast. I have continuously changed course when new situations arise. Each time I was apprehensive about letting go of the past, but in the end, each time I changed, I found the joy in medicine again. \diamond

Author

Keith L. Callahan, MD, MBA, Clinical Associate Professor of Family Medicine, Warren Alpert Medical School of Brown University, Providence, RI.

Correspondence

keith.callahan1@gmail.com

